FEC FORM 1

2015 - 07 - 08 - 0M - 00005668

Office

Use

Only

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

7115 Morrice Ruse Rolly 8: 42

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5				
N.U.D.1.S.T. R.1.G.	1,TS, COALIT	101					
ADDRESS (number and street)	14418 EAGL	E POINT					
	K15.						
	[K, 1, S, S, L,M,M, E, E] CΠΥ▲		F_L 3,4,7,4,6,- ZIP CODE ▲				
COMMITTEE'S E-MAIL ADDRE	ss						
(Check if address is changed)	N.U.D.1.5.T.R.1.6	H.T.S. Q.G.H.A.I.L.	COM.				
1	Optional Second E-Mail Add	dress	ı				
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
COMMITTEE'S WEB PAGE ADD (Check if address is changed)							
`2. DATE \$\frac{\text{\$\tilde{D}}}{\tilde{D}} \tag{\text{\$\tilde{O}}}	2 7015						
3. FEC IDENTIFICATION N	JMBER ▶ C O	0558073					
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)					
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
Type or Print Name of Treasure	FRED W. VA	AN NEST					
Signature of Treasurer	r FRED W. VA	<i></i>	Date 07 02 2015				
NOTE: Submission of false, erron		may subject the person signing	this Statement to the penalties of 52 U.S.C. §30109 WITHIN 10 DAYS.				

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

FEC FORM 1

(Revised 06/2012)

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		OMMITTEE						
	uluate							
(a)	Start Heli	This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complet information below.)	e the candidat	ie				
Name Cano	e of lidate		1 1 1 1	1_1_				
	lidate Affiliati	Office on Sought: House Senate President	State					
			District	. 4 50%				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Nam Cano	e of didate			1				
Dar	ty Con	nmittee:						
	ty Con	(National, State (De	emocratic,	Doeb.				
(d)	• •	This committee is a or subordinate) committee of the Rep	publican, etc.)	Party.				
Poli	tical A	ction Committee (PAC):						
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ted organization	on is a				
		Corporation Corporation w/o Capital Stock L	abor Organizat	tion				
		Membership Organization Trade Association C	Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.						
(f)	; ;-	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
		In addition, this committee is a Lobbyist/Registrant PAC.						
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Join	t Fund	draising Representative:						
(g)	:	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(h)	51 4 (3)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	r more political	1				
	Com	imittees Participating in Joint Fundraiser						
	1.		anear ea partir	- 7.8				
				2 2 2 2				
	2.	C The state of the	ing the state of t					
	3.	FEC ID number C	e Carlos anticos de santo					
	4.		nangaraga segi	5.000 ·				

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Write or Type Committee Name

6. Name of Any Connected (Organization, Affiliated Committee, Joint F	undraising Representative	, or Leadership PAC Sponsor
MOMELLILL			
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Sponso
·	· · · · · · · · · · · · · · · · · · ·		·
	ntify by name, address (phone number - op	tional) and position of the p	person in possession of committee
books and records.			
Full Name			1111111
Mailing Address			
		1	
Title or Position	CITY	STATE	ZIP CODE
1	1	1	
		Telephone number	
	nd address (phone number - optional) of the	treasurer of the committee	e; and the name and address of
any designated agent (e.g.,	assistant treasurer).		
Full Name of Treasurer FRE_1	O, W, VAN, NEST	1 1 1 1 1 1 1 1 1	
Mailing Address	[441,8 EAGLE POI	NIT	1.
		<u> </u>	
	[K, 1, 5, 5, 1, M, M, E, E, 1, 1, 1, 1	FL FL	34746-
Title or Position	CITY	STATE	ZIP CODE
TREASURER		Telephone number	971-13011-19389

CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 02/2009)

CO MA SOIS FMOI

ELECTIONS COMMISSION 999 E STREET, NW FEDERAL

89702 WASHINGTON, DC

(3/2015)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt** Hand Delivered Postmarked Date of Receipt **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER DATE PREPARED