Image# 201601209004527668			_	PAGE 1 / 5
FEC FORM 1	STATEMEI ORGANIZ		Of	
1. NAME OF	(Check if name	Example: If typing, type		fice Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
1				
ADDRESS (number and street)	1900 WEST OAKLAND PARI	K BLVD.		
(Check if address is changed)	# 9961			
	FORT LAUDERDALE		FL 333	
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)		nittees@gmail.com		
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE AL (Check if address is changed)	DDRESS (URL)	ionCommitteesDirectory.com		
	20 / 2016			
3. FEC IDENTIFICATION N	IUMBER ► C c	00605386		
4. IS THIS STATEMENT	K NEW (N) OR	AMENDED (A)		
I certify that I have examined	this Statement and to the best	of my knowledge and belief i	t is true, correct and	complete.
Type or Print Name of Treasur	er JOSH LAROSE			
Signature of Treasurer	H LAROSE	[Electronically Filed]	Date 01	D D / Y Y Y Y 20 2016
NOTE: Submission of false, error		may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEC FC	orm 1 (Revised 02/2009)	Page 2
TYPE OF (COMMITTEE	
Candidat	e Committee:	
(a)	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. (Compleinformation below.)	te the candidate
Name of Candidate		
Candidate Party Affiliat	tion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	mmittee:	
(d)		emocratic, publican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is
	Corporation Corporation w/o Capital Stock	abor Organization
	Membership Organization	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 segre committee. (i.e., nonconnected committee)	egated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)	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.	or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

WORLD'S RICHEST PERSON JOSUE LAROSE PHARMACEUTICAL COMPANIES COMMITTEE

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraisin	ng Representative	Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

JOSH LAF	DSE	
Full Name		
Mailing Address	1900 WEST OAKLAND PARK BLVD.	
	# 9961 	
	FORT LAUDERDALE FL 33310	
Title or Position	CITY STATE ZIP CODE	
	Telephone number 800 768 6650	

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	JOSH LAROSE		
of Treasurer			
Mailing Address	1900 WEST OAKLAND PARK BLVD.		
	# 9961 		
		FL 3331	0
	CITY	STATE	ZIP CODE
Title or Position		ephone number	768 6650

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Full Name of Designated Agent		
Mailing Address	s 1900 WEST OAKLAND PARK BLVD.	
	# 9961	
		33310
	CITY STATE	ZIP CODE
Title or Position	n	800 - 768 - 6650

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name	of	Bank,	Depository,	etc.
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BANK			
Mailing Address	701 BRICKELL AVENUE		
	MIAMI		33131
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: