| Committee Name: | |
|-------------------------------------|---|
| Veterars For Responsible Leadership | |
| If registered, FEC ID: | _ |
| | |
| Today's Date: | |
| 6/25/17 | |
| Federal Flection Commission | |

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization — Unlimited Contributions

To Whom It May Concern:

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.

Respectfully submitted,

| Treasur | er's Name: | | |
|---------|------------|------|-------------|
| Dag | iel Bark | huff | , Treasurer |

2017 - 06 - 29 - 08 - 00159692

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2017 JUN 29 AM 11: 52

| | | Office Use Only |
|----------------------------------|--|-----------------------------------|
| NAME OF COMMITTEE (in full) | (Check if name Example: If typing, type is changed) over the lines. | 12FE4M5 |
| WETERAMS FO | O.R. RESPONSIBILE LEADE | ERSHIP |
| | | |
| ADDRESS (number and street) | 166 HIDDENMEADOW LA | AME |
| ☐ (Check if address is changed) | | |
| · · | SOUTH BURLINGTION | V.T 0.5.4.0.1 |
| COMMITTEE'S E-MAIL ADDRE | SSS SS | |
| (Check if address is changed) | V.F.R.L@g.maiilCom | |
| is changed, | Optional Second E-Mail Address | |
| | Market No. 1 Perch | |
| | | i |
| COMMITTEE'S WEB PAGE AD | DRESS (URL) | , |
| (Check if address is changed) | | |
| | | |
| 2. DATE 6 6 2 | 5 2017 | |
| 3. FEC IDENTIFICATION N | UMBER ▶ C | |
| 4. IS THIS STATEMENT | NEW (N) OR AMENDED (A) | |
| I certify that I have examined t | his Statement and to the best of my knowledge and belief | it is true, correct and complete. |
| Type or Print Name of Treasure | Daniel Barkhuff | |
| Signature of Treasurer | De M | Date 06 25 2017 |
| NOTE: Submission of false, error | neous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED | |
| Office Use | For further information Federal Election Commis Toll Free 800-424-9530 | EEL ELIBIN I |

Toll Free 800-424-9530 Local 202-694-1100

| FEC F | Form 1 (Revised 02/2009) Page 2 |
|----------------------------|--|
| TYPE OF | COMMITTEE |
| Candida | te 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. (Complete the candidate information below.) |
| Name of Candidate | |
| Candidate Party Affilia | Office State Senate President District |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. |
| Name of Candidate | |
| Party Co | ommittee: |
| (d) | (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party. |
| Political | Action Committee (PAC): |
| (e) | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a |
| (-) | Corporation Corporation Wo Capital Stock Labor Organization |
| | Corporation we capital stock |
| | Membership Organization Trade Association 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 |
| 7- | 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.) |
| Joint Fu | ndraising 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) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate. |
| Co | mmittees Participating in Joint Fundraiser |
| 00 | |
| 1, | FEC ID number |
| 2. | FEC ID number |
| 3. | FEC ID number |
| 4. | |

| FEC Form 1 (Revis | ed 02/2009) | Page 3 |
|--|--|----------------------------------|
| Write or Type Committee N | ame | |
| 6. Name of Any Connecte | ed Organization, Affiliated Committee, Joint Fundraising Representative, | or Leadership PAC Sponsor |
| | | |
| | | |
| Mailing Address | | |
| | | |
| | CITY STATE | ZIP CODE |
| Relationship: Conne | ected Organization Affiliated Committee Joint Fundraising Representat | ive Leadership PAC Sponso |
| 7. Custodian of Records: books and records. | Identify by name, address (phone number optional) and position of the pe | erson in possession of committee |
| Full Name DA | NIEL BARKHUFF | |
| Mailing Address | 1.6.6 HIDDENMEADOW LAME | |
| | | |
| | SOUTH BURLIMGTOM VIT | 054011- |
| Title or Position | CITY STATE | ZIP CODE |
| ISITIRATEGI | Telephone number | 0,21-[3,3,8]-[2,5,5,5 |
| Treasurer: List the name any designated agent (e | e and address (phone number optional) of the treasurer of the committee; g., assistant treasurer). | and the name and address of |
| Full Name of Treasurer | MIEL BARKHUFF | |
| Mailing Address | 11.6.6. HIDDENMEADOW LAME | |
| | | |
| Title on Desition | SIOIUITIH BIUIRICIIMETIOIM VITI | ZIP CODE |
| Title or Position | Telephone number | |

| FEC Form 1 (Revise | d 02/2009) | | Page 4 |
|---|----------------------------|--|---------------------------------------|
| | | | |
| Full Name of Designated Agent | | 1 1 1 | |
| _ | 1 | —— <u>1 </u> | |
| Mailing Address | | | |
| | | | |
| · | CITY | STATE | ZIP CODE |
| Title or Position | | | |
| | Telephone nur | mber <u>i</u> | |
| safety deposit boxes or main Name of Bank, Depository, | etc. L S F A R 6 0 | <u> </u> | |
| Mailing Address | 1.1.8.2.5, LOMAS, BIOULEVA | (R_1D_1) | |
| | | | |
| | ALBUQUE AQUE | MW | 18,71,121- |
| | CITY | STATE | ZIP CODE |
| Name of Bank, Depository, | etc. | | |
| T.D. | BANK | | · · · · · · · · · · · · · · · · · · · |
| Mailing Address | 1.855 WILLISTON ROAD | | |
| | | | |
| | SOUTH BURLINGTON | VJ | 0.54.0.31- |
| | CITY | STATE | ZIP CODE |

| FEC | Form | 1S | (Revised | 02/2017) |
|-----|------|----|----------|----------|

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

| Page | of | |
|------|----|--|

| 5(g) or (h). Join | nt Fundraising F | Participant: | | | | | |
|------------------------------|-------------------------------------|-----------------------|-----------------------|-------------------|-------------|--------------------------------|----------|
| 1. | | <u> </u> | | ☐ FEC ID | number | | |
| 2. | | <u> </u> | 1 1 1 1 1 1 | FEC ID | number | | |
| 3. <u> </u> | | 1 1 1 1 1 1 1 | | FEC ID | number | C | |
| 4. | | | | FEC ID | number | (C) | J |
| 6. Name of Any | / Connected Or | ganization, Affiliate | d Committee, Joint | Fundraising Rep | resentative | , or Leadership PAC Sponso | or |
| | | | | | | | Ш |
| | | | | | | | |
| Mailing | Address | 1 1 1 1 1 | | | | | |
| | l | | | | 111. | | <u>.</u> |
| Relation | nship: | | CITY ▲ | | STATE A | ZIP CODE ▲ | |
| | Connected C | organization Affil | iated Committee | Joint Fundraising | Representa | tive Leadership PAC Spo | nsor |
| 8. Designated A | Agent: Identify b | y name, address (pł | none number – optio | nal) | | | |
| Full Name | е [| | | | | | |
| Mailing A | ddress | | | | | | |
| | | | 1 1 1 1 1 1 1 | | | | لــــا |
| | | | CITY A | | STATE A | ZIP CODE ▲ | |
| TITLE O | R POSITION ▼ | | 1 | | | 1 1 1 1 | i |
| | | | | Telephone Nu | ımber [| | |
| | her Depositorie t boxes or maint | | other depositories in | which the commit | tee deposit | s funds, holds accounts, rents | |
| Name of Ban Depository, e | | | | | | | |
| Mailing | g Address | | | | | | |
| | ! | <u> </u> | | | | | |
| 1 | | | CITY A | | STATE A | ZIP CODE ▲ | • |

BARKHUFF Drive 1227Setter Drive Albuquerque, NM87117

2017 JUN 29 AM 11: 52 100000

24 JUN 2017 PH 3 L

Federal Election Comission 999 E St NW Washington, DC 20463

ALEUDUERCLYE NA BY

| 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. | | | | | |
|---|----------------------------|-----------------------------|--|--|--|
| Hand Delivered | | Date of Receipt | | | |
| naria Deliverea | | | | | |
| Caro Fig. 3: 4: | Postmarked | Date of Receipt | | | |
| USPS First Class Mail | 6/24/17 | し/29/17 Postmarked (R/C) | | | |
| USPS Registered/Certified | d | Postmarked (R/C) | | | |
| USPS Priority Mail | | Postmarked | | | |
| USPS Priority Mail Expres | ss | Postmarked | | | |
| Postmark Illegible | | | | | |
| No Postmark | | | | | |
| Overnight Delivery Service | e (Specify): | Shipping Date | | | |
| , | Next B | Susiness Day Delivery | | | |
| Received from House Rec | cords & Registration Offic | Date of Receipt e | | | |
| Received from Senate Pu | blic Records Office | Date of Receipt | | | |
| Received from Electronic | Filing Office | Date of Receipt | | | |
| Other (Specify): | Da | te of Receipt or Postmarked | | | |
| | | | | | |
| PREPARER SAM | | し/29/17 DATE PREPARED | | | |
| (3/2015) | | 3,112,1112 | | | |