## 12030850708

FEC FORM

## STATEMENT OF ORGANIZATION

PUBLIS INC. 16.5
PUBLIS INC. 16.5
EVISION
2012 JUL 17 PM 12: 52
Office Use O

FORM 1	UNGAN		2012 JUL 1	7 PM 12: 52 Office Use Only
NAME OF     COMMITTEE (in full)	(Check if name is changed)	ne Example: If to		24M5
American T	hird Postion	n Mation	il, Gannitt	ee
ADDRESS (number and street)	19811 W.	charleston	Ste 2-4	(41::::::::::
(Check if address is changed)				
	CITY A	J <del>a</del> s 1 1 1 1 1	STATE	89.117 - ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	:ss			
(Check if address is changed)	Johnson@	LosLaw. Go	kŋ	
	Optional Second E-M	ail Address	·	t
(Check if address is changed)  2. DATE	2 20.(2	100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u>.</u>	
3. FEC IDENTIFICATION N	UMBER ▶	0,005,186	9	
4. IS THIS STATEMENT	NEW (N) O	DR AM	ENDED (A)	
I certify that I have examined t	his Statement and to the	e best of my knowledg	e and belief it is true, o	orrect and complete.
Type or Print Name of Treasure	r Willia	um John	<b>√</b> δ <b>−</b>	
Signature of Treasurer			Date	07 12 2012
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.				
Office Use Only		Federal E Toll Free	er Information contact: Election Commission 800-424-9530 2-694-1100	FEC FORM 1 (Revised 06/2012)

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TYPE OF COMMITTEE Candidate 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.)			
Nam Cand	e of didate	L T T T T T T T T T T T T T T T T T T T			
	didate / Affiliati	Office Sought: House Senate President  District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Nam Cano	e of didate				
Par	ty Con	nmittee:  (National State American (Democratic			
(d)	X	This committee is a National problem of the 3 Republican, etc.) Party.			
Poli	tical A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a			
		Corporation W/o Capital Stock Labor Organization			
		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 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 Func	Iraising 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 fedoral 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.			
Committees Participating in Joint Fundraiser					
	1.	FEC ID number C			
	2.	FEC ID number C			
	3.	FEC ID number C			
	4.	FEC ID number			

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Write or Type Committee Name		
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundralsing Representative, or Lea	dership PAC Sponsor
b. Hame of Any Connected C	igameation, Annated Committee, South Canadamy Representative, or Lea	acisiip i Ao opulisoi
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Mailing Address		
		, <b> - </b> , , ,
	CITY STATE	ZIP CODE
Poletica bio		
Helationship: Garage Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
7 - Custodian of Decades Idea	site by some address (above supplies on the source in	
<ol> <li>Custodian of Records: Ident books and records.</li> </ol>	tify by name, address (phone number optional) and position of the person in	n possession of committee
Full Name	<del></del>	
Mailing Address		
		<del></del>
		<u> </u>
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
8. Treasurer: List the name and	address (phone number optional) of the treasurer of the committee; and the	e name and address of
any designated agent (e.g., as		e name and address of
Full Name	[Cam Johnson	
of Treasurer	250 1 //	<del></del>
Mailing Address	137 5 Tigueria St. #190	
	Libis Anythis Cot 9	00/ <del>/</del>   -
THE DOCUMENT	CITY STATE	ZIP CODE
Title or Position		621-13000

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## **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 USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label **Postmarked USPS Express Mail** 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):