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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. JUSTICE 4 KAROLINA INITIATIVE 3350 BOBOLINK CIRCLE SW ADDRESS (number and street) (Check if address is changed) ATLANTA 30311 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS FREEKAROLINA@YAHOO.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 29 2015 C00578229 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR 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. M. S. MOSLEY Type or Print Name of Treasurer M. S. MOSLEY [Electronically Filed] 05 18 2015 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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		OMMITTEE	
(a)		This committee is a principal campaign committee. (Complete the candidate information below	<i>i.</i>)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Coinformation below.)	mplete the candidate
Nam Cand	e of didate		
	didate / Affiliation	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee: (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	segregated fund or party
		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	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number	
	3.	FEC ID number C	
	4.	FEC ID number	

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Write or Type Committee Nar		T age 🗸
	AROLINA INITIATIVE	
	Organization, Affiliated Committee, Joint Fundraising Represen	ntative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY ST	ATE ZIP CODE
Relationship: Connect	red Organization Affiliated Committee Joint Fundraising Repr	resentative Leadership PAC Sponsor
 Custodian of Records: Id books and records. 	entify by name, address (phone number optional) and position of	f the person in possession of committee
M. S. Me	OSLEY	
	3350 BOBOLINK CIRCLE SW	
Mailing Address		
	ATLANTA	A 30311
Title or Position	CITY STA	TE ZIP CODE
	Telephone number	
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the com , assistant treasurer).	mittee; and the name and address of
Full Name M. S. MC	DSLEY	
of Treasurer	j3350 BOBOLINK CIRCLE SW	
Mailing Address	SOUR DO DO DO LINE CON COLLEGE	
		30311
Title or Position	CITY STAT	TE ZIP CODE
	Telephone number	

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Full Name of Designated	1	
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other safety deposit be Name of Bank,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
safety deposit be	Depository, etc. TO BE AMENDED TO BE AMENDED	
safety deposit be Name of Bank,	Depository, etc. TO BE AMENDED TO BE AMENDED	
safety deposit be Name of Bank,	Depository, etc. TO BE AMENDED TO BE AMENDED	0331
safety deposit be Name of Bank,	Depository, etc. TO BE AMENDED TO BE AMENDED	
safety deposit be Name of Bank,	TO BE AMENDED TO BE AMENDED ATLANTA CITY STATE	0331
safety deposit be Name of Bank, Mailing Address	Depository, etc. TO BE AMENDED TO BE AMENDED ATLANTA CITY STATE Depository, etc.	0331 ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. TO BE AMENDED TO BE AMENDED ATLANTA CITY STATE Depository, etc.	0331 ZIP CODE
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: 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = 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: