March St. Care

YE MARSON & CONCURS AND HAWKINS & ASSOCIATES PLLC

ATTORNEYS AT LAW

connected organizations with regards to Businesspeople for Change. In receipt of your terror dated biovember 447.225,20278202701 to the Commission the attached amended Fears I for Businesspeepigosy businessessurpled parents are no affiliated or

Fax: 904-339-9126

Date has been to

David Butler. Campaign Finance Analyst Reports Analysis Division Federal Election Commission 999 E Street, N.W. Washington, DC 20463

December 9, 2008

RE: Amended Form 1, Businesspeople for Change, ID # C00456301

Dear Mr. Butler:

In receipt of your letter dated November 28, 2008; I submit to the Commission the attached amended Form 1 for Businesspeople for Change. As indicated, there are no affiliated or connected organizations with regards to Businesspeople for Change.

ATTORNEYS AT

Emilian Santagore

As always, I remain at your service in regards to this PAC.

Kindest regards,

Alan T. Hawkins

RECEIVED FEC MAIL CENTER.

2018 DEC 16 AM 9: 32

FEC

STATEMENT OF ORGANIZATION

FORM 1					Office Use Only
NAME OF COMMITTEE (in full)	(Check if na		ple:If typing, type he lines.	.12FE4M	
BUSINESSPE	OPLE FOR CHA	NGE			
	<u> </u>	<u>, LL ', LL</u>	<u> </u>		
<u> </u>			<u> </u>		<u> </u>
ADDRESS (number and stre	503 NE (1TH AVE	, APT 3	<u> </u>	<u> </u>
(Check if address	s L			. رـــ اــــــــــــــــــــــــــــــــ	<u> </u>
is changed)	GAINES	JILLE	· L :	F4	32601
COMMITTEE'S E-MAIL AI	DDRESS	CITY		STATE	ZIP CODE
<u> </u>	111111111	<u> </u>			
<u></u>	<u> </u>	<u></u>			
COMMITTEE'S WEB PAGE	E ADDRESS (URL)				
<u> </u>	<u> </u>		<u> </u>		
L	_				
COMMITTEE'S FAX NUM	BCD				· ·
પ્રાક્ષે · · 2. DATE	bear of the second				
3. FEC IDENTIFICATIO	ON NUMBER .	C 0 04 5	6301		
4. IS THIS STATEMENT	· NEW (N)	OR X	AMENDED (A)		
I certify that I have exami	ned this Statement and to t	he best of my kr	owledge and belief	it is true, corre	ect and complete.
Type or Print Name of Tre	asurerALAN	J T. HA	WKINS		
	1	_/		_{7,1}	w + p 6 . 4 \ 2 3
Signature of Treasurer	- Juli	7/-/		Date /	2 09 2008
NOTE: Submission of false,	erroneous, or incomplete info				to the penalties of 2 U.S.C. §437g.
Office Use Only FE3AN042 PDF		F	or further information ederal Election Commis- foll Free 800-424-9530 ocal 202-694-1100		FEC FORM 1 (Revised 12/2007)

FEC Fo	orm 1 (Revised 12/2007)			Page 2			
	COMMITTEE e Committee:			-			
(a)	This committee is a principal co	ampaign committee. (Com	plete the candidate inform	ation below.)			
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name of Candidate	<u> </u>						
Candidate Party Affilia	Offic Sou		Senate	State President District			
(c) .	This committee supports/oppos	es only one candidate, ar	nd is NOT an authorized c	ommittee.			
Name of Candidate							
Party Co	mmittee:	(National Ctate		(Damasuntin			
(d)	This committee is a	(National, State or subordinate)	committee of the	(Democratic, Republican, etc.) Party.			
Political A	Action Committee (PAC):	·· -					
(e) :	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a						
	Corporation	Corpo	eration w/o Capital Stock	Labor Organization			
	Membership Organizati	on Trade	Association	Cooperative			
(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 committe	ee is a Leadership PAC. (lo	dentify sponsor on line 6.)				
Joint Fun	draising Representative:						
(g)	This committee collects contribut committees/organizations, at lea		·	·			
(h) ·	This committee collects contribut committees/organizations, none						
Con	Committees Participating in Joint Fundraiser						
1.		1,11!!!	FEC ID number	C			
2.		<u> </u>	FEC ID number	C			
3.		<u> ! : </u>	FEC ID number	C			
4.	11::11:	<u> </u>	FEC ID number	C			
5.		<u> </u>	FEC ID number	C			

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1	FEC Form 1 (Revised	12/2007)	Page 3
٧	Vrite or Type Committee Nam	,	
6.	Name of Any Connected	Organization, Affiliated Committee, Leadership PAC Sponsor or	Joint Fundraising Representative
N	ONE		
_			
	Mailing Address		
		<u> </u>	
			.] [, , , ,] -] . , ,
	D. L. V. ankin	CITY STA	ATE ZIP CODE
	Relationship: Connected Organization	Affiliated Committee Leadership PAC Sponsor	Joint Fundraising Representative
7.	Custodian of Records: Ide books and records.	tify by name, address (phone number optional) and position of	the person in possession of committee
	Full Name	<u> </u>	
	Mailing Address		
	Title or Position	CITY STAT	TE ZIP CODE
		Telephone number	
8.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the commissistant treasurer).	mittee; and the name and address of
	Full Name of Treasurer	 	_ <u>i_i_i_l_li_i_l_i_l_l_</u>
	Mailing Address		
		<u> </u>	
	Title or Position	CITY STAT	E ZIP CODE
	<u> </u>	Telephone number	

CITY

FEC Form 1 (Revised 12/2007)

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ZIP CODE

STATE

Ø

Name of Bank, Depository, etc.

Mailing Address

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 **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ 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): 12/16/08 **DATE PREPARED**