

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

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1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

MIKE GOOSSEN FOR CONGRESS

ADDRESS (number and street)

13223 E Ashcroft Ave

(Check if address  
is changed)

Sanger  
CITY ▲

KA  
STATE ▲

93657-  
ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address  
is changed)

mgoossen@reagan.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

mikegoossenforcongress.com

2. DATE

01 / 23 / 2013

3. FEC IDENTIFICATION NUMBER ▶

C

4. 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.

Type or Print Name of Treasurer

Michael Goossen

Signature of Treasurer

Date

09 / 23 / 2013

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.

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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

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5. 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.)

Name of Candidate Michael Wayne Goossen

Candidate Party Affiliation REP Office Sought:  House  Senate  President State CA District 16

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

Party Committee:

- (d)  This committee is a \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (Democratic, 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 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.)

Joint Fundraising 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.

Committees Participating in Joint Fundraiser

1. \_\_\_\_\_ FEC ID number C
2. \_\_\_\_\_ FEC ID number C
3. \_\_\_\_\_ FEC ID number C
4. \_\_\_\_\_ FEC ID number C

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Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising 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.

Full Name

Treasurer

Mailing Address

[Empty grid lines for mailing address]

Title or Position

CITY

STATE

ZIP CODE

[Empty grid lines for title or position]

Telephone number

[Empty grid lines for telephone number]

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 of Treasurer

Mike Goossen

Mailing Address

13223 E Ashcroft Ave

[Empty grid lines for mailing address]

Sanger

CA

93657

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

559-681-6559

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Full Name of Designated Agent

Fred Vanderhoof

Mailing Address

6420 E. Townsend Ave

Fresno

CITY

CA

STATE

93727

ZIP CODE

Title or Position

Campaign Manager

Telephone number

559-908-5543

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.

CHASE

Mailing Address

7892 N. Blackstone

Fresno

CITY

CA

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

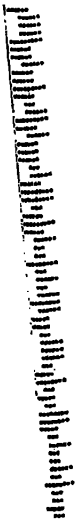
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Mr. and Mrs. Mike Goossen  
13223 E Ashcroft Ave  
Sanger, CA 93657

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*JMD*  
 PREPARER  
 (8/2013)

9/18/13  
 DATE PREPARED

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