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FEC FORM 1

Only

STATEMENT OF ORGANIZATION

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2008 OCT 20 PM 1: 14

Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. LAYERS, FEARAL, PAC ADDRESS (number and street) (Check if address is changed) CITY STATE ZIP CODE **COMMITTEE'S E-MAIL ADDRESS** DEUELARUSER) USA, COM COMMITTEE'S WEB PAGE ADDRESS (URL) ASEBALL PLAYERS PACE COM **COMMITTEE'S FAX NUMBER** 10 13 2008 DATE C **FEC IDENTIFICATION NUMBER** IS THIS STATEMENT 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 78 13 2338 Signature of Treasurer 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 Toli Free 800-424-9530 (Revised 12/2007)

Local 202-694-1100

FEC For	m 1 (Revised 12/2007)					Page 2
TYPE OF C			<u> </u>			
Candidate	Committee:					
(a)	This committee is a princ	ipal campaign co	mmittee. (Comple	te the candidate info	rmation below	<i>(</i> .)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate		-1-1-1-1-1-			1111	
Candidate Party Affiliation	nn	Office Sought:	House	Senate	President	State
rary Amain	<i>.</i> ,	Sought.	nouse	Senate	Fresident	District
(c)	This committee supports/	opposes only one	candidate, and i	s NOT an authorized	l committee.	
Name of Candidate		1111				
Party Com	mittee:					
(d)	This committee is a	•	lational, State subordinate) cor	nmittee of the		(Democratic, Republican, etc.) Party.
Political A	ction Committee (PAC	 C):				
(e)	This committee is a sepa	rate segregated t	und. (Identify con	nected organization o	n line 6.) Its co	onnected organization is a:
	Corporation		Corporat	ion w/o Capital Stock		Labor Organization
	Membership Orga	anization	Trade As	sociation	:	Cooperative
(n) X	This committee supports/committee. (i.e., nonconne	opposes more that	an one Federal c	andidate, and is NOT	a separate :	segregated fund or party
,	In addition, this co	mmittee is a Lead	ership PAC. (Iden	tify sponsor on line 6.)	
Joint Fund	raising Representativ	/e;				
(g)	This committee collects co committees/organizations,	• • •	• •	-		
(h)	This committee collects co- committees/organizations,					two or more political
Com	mittees Participating in .	Joint Fundraise	r			
1.			1111	FEC ID num	per C	
2.				FEC ID num	per C	
3.	Ш	1111	1111	FEC ID num	per C	
4,			1111	FEC ID numb	per C	
5.				FEC ID numb	per C	

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FEC Form 1 (Revised	12/2007)	Page 3
Write or Type Committee Name	•	
6. Name of Any Connected (Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundra	lsing Representative
Mailing Address		
		لـــا-لــــا
Polotlonobio	CITY STATE	ZIP CODE
Relationship: Connected Organization	Affiliated Committee Leadership PAC Sponsor Joint Fund	Iraising Representative
 Custodian of Records: Idea books and records. 	ntify by name, address (phone number optional) and position of the person in	possession of committee
Full Name	SUE LAROSE	
Mailing Address	1929 SW 15TH STREET	
	LOGERFIELD BENCH HO BE	3441-16276
Title or Position	CITY STATE	ZIP CODE
	RIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	-12201-10693
3. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	e name and address of
Full Name of Treasurer	SUE, LAROSE	
Mailing Address	929, SW, 1574, STREET	
	DEER FIEHD, BEACH, LGU B.	3441-6276 ZIP CODE
Title or Position TURER SURG	R Telephone number 254	-1358-19328
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CITY

STATE

ZIP CODE

Page 4

FEC Form 1 (Revised 12/2007)

Full Name of Designated Agent

Mailing Address

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Postmark Illegible						
No Postmark						
Overnight Delivery Service (Specify):	Shipping Date					
Next Busines	ss Day Delivery					
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Received from Senate Public Records Office	Date of Receipt					
Received from Electronic Filing Office	Date of Receipt					
Other (Specify):	Receipt or Postmarked					
PREPARER	10/20/08 DATE PREPARED					
(3/2005)						