FEC

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Downingtown Independent Victory PAC 1424 Federal Dr ADDRESS (number and street) **Suite 1200** (Check if address is changed) Downingtown 19335 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Dtownvictorypac@usa.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 31 2016 C00618751 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. MJ Chegini Type or Print Name of Treasurer MJ Chegini [Electronically Filed] 05 2016 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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TYPE OF C		<u>-</u>
(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. (Corinformation below.)	nplete the candidate
Name of Candidate		
Candidate Party Affiliati	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con	nmittee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 scommittee. (i.e., nonconnected committee)	egregated 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.)	
Joint Fund	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	

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Write or Type Committee Name		
Downingtown In	dependent Victory PAC	
6. Name of Any Connected Or	rganization, Affiliated Committee, Joint Fundraising Representative, o	r Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	ve Leadership PAC Sponsor
 Custodian of Records: Ident books and records. 	ify by name, address (phone number optional) and position of the per	son in possession of committee
MJ Chegini Full Name		
Mailing Address	500 Westover Dr	
	Box 5783 Sanford NC	27330
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; a ssistant treasurer).	and the name and address of
Full Name MJ Chegini of Treasurer		
Mailing Address	500 Westover Dr	
	Box 5783	
	Sanford	27330
Title or Position Treasurer	CITY STATE Telephone number	ZIP CODE

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
	r Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds. Depository, etc. Wells Fargo	1
safety deposit b	Depository, etc. Wells Fargo	
safety deposit b Name of Bank,	Depository, etc. Wells Fargo 100 W Lincoln Hwy	
safety deposit b Name of Bank,	Depository, etc. Wells Fargo 100 W Lincoln Hwy Exton PA 1934 CITY STATE	1
safety deposit b Name of Bank, Mailing Address	Depository, etc. Wells Fargo 100 W Lincoln Hwy Exton PA 1934 CITY STATE	1
safety deposit b Name of Bank, Mailing Address	Depository, etc. Wells Fargo 100 W Lincoln Hwy Exton CITY STATE Depository, etc.	1
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Wells Fargo 100 W Lincoln Hwy Exton CITY STATE Depository, etc.	1
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Wells Fargo 100 W Lincoln Hwy Exton CITY STATE Depository, etc.	1

: 97 'A = G7 9 @ G5 B9 CI G'H9 LHF 9 @ 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 unlimited 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: