

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Israel of God PAC

ADDRESS (number and street) 6126 FAULKNER CIRCLE

(Check if address is changed)

JACKSONVILLE CITY ▲ FL STATE ▲ 32244-2473 ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) SHEXTRA_DAVEROBERTS@YAHOO.COM

Optional Second E-Mail Address MLFITZGERALD3508@comcast.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 05 / 29 / 2015

3. FEC IDENTIFICATION NUMBER C C00572396

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 Mary L. Fitzgerald

Signature of Treasurer Mary L. Fitzgerald [Electronically Filed] Date 05 / 29 / 2015

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.