

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

APOLLO GROUP INC. POLITICAL ORGANIZATION FOR LEGISLATIVE LEADERSHIP

ADDRESS (number and street) 4025 S. Riverpoint Pkwy

(Check if address is changed) MS CF-KX10

Phoenix AZ 85040-

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) conway.casillas@apollogrp.edu

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 01 / 10 / 2013

3. FEC IDENTIFICATION NUMBER ▶ C C00309781

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 James Conway Casillas

Signature of Treasurer James Conway Casillas *[Electronically Filed]* Date 01 / 10 / 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.