TAMO DELIVE

February 17, 2017

MAD DELIVERED

Federal Election Commission 999 E Street, NW Washington, DC 20463

Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raised in unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, inkind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Sincerely,

Colleen Martin

Treasurer

Stop GOP Governors PAC

FEC MAIL CENTER

2017 - 02 - 17 - 03 - 00141782

MAND DELIVERS

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVE AGE 1/4 -FEC MAIL CENTER

2017 FEB 1.7 PM 4: 31

			Office Use Only	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Stop GOP Gover	ors PAC	 	· · · · · · · · · · · · · · · · · · ·	
	1111111			
ADDRESS (number and street)	PO Box 597758			
(Check if address is changed)				
•	Chicago		IL 60659-9998 STATE ▲ ZIP CODE ▲	
COMMITTEE'S E-MAIL ADDRES	SS			
(Check if address is changed)	Brian@pcmsilc.com			
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE ADD (Check if address is changed)	None	<u> </u>		
2. DATE 02 17	2017			
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	Martin, Colleen, , Colle	een Martin		
Signature of Treasurer Martin	1, Colleen, , ,	Lht	Date 0.2 1.7 2017	
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 Use		For further information co Federal Election Commissio Toll Free 800-424-9530		

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	FEC F	orm 1 (Revised 02/2009)	Page 2
. TYP	E OF (COMMITTEE	
Car	ndidat	te Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(þ)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	e the candidate
	ne of didate		
	didate y Affiliat	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Cor	mmittee:	
(d)			nocratic, ublican, etc.) Party.
Poli	itical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is a:
		Corporation Corporation w/o Capital Stock	bor Organization
		Membership Organization Trade Association Co	ooperative
		n addition, this committee is a Lobbyist/Registrant PAC.	
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	pated 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.)	
Join	t Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	
,	2.	FEC ID number C	
	3.		
	4		
	4.	Teo io number O	

		_
FEC Form 1 (Revised		Page 3
Write or Type Committee Name		
Stop GOP Gov		
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
NONE		
Mailing Address		
	CITY STATE Z	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundralsing Representative Lead	dership PAC Sponsor
 Custodian of Records: Ider books and records. 	tify by name, address (phone number optional) and position of the person in poss	ession of committee
Foucart, B	rian, , ,	, ,
Full Name LIII	,1050 17th Street, NW	<u> </u>
Mailing Address	Suite 590	<u> </u>
	WashiIngton DC 20036	
Title or Position	CITY STATE Z	IP CODE
Assistant Treasurer		28 1581
8. Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the nam ssistant treasurer).	e and address of
Full Name Martin, Col	een,,,	1
Mailing Address	PO Box 597758	
	<u>[</u>	<u> </u>
	Chicago	
Title or Position Treasurer	CITY STATE ZI	P CODE

			
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Full Name of Designated Agent	Villivalam, Ram, , ,		
Mailing Address	PO Box 597758		
	Chicago	IL STATE	60659-9998 LLLLLLLLLLLLLLLLLLLLLLLLLLLLLLLLL
Title or Position Chairman		number 20	02 - 628 - 1581
). Banks or Othe	Depositories: List all banks or other depositories in which the compacts or maintains funds.	mittee deposits f	unds, holds accounts, rents
Name of Bank,			
•	Amalgamated Bank		
Mailing Address	1825 K Street, NW		
	Washington	DC	20005
	CITY	STATE	ZIP CODE
Name of Bank,	Depository, etc.		
			ليبيبين
Mailing Address			•

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Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registration	Date of Receipt on Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
MD	2/17/2017
PREPARER ///~ (3/2015)	DATE PREPARED