Committee Name:

MAIN	STREET	SUPERPAC	
If registered	, FEC ID:		

Today's Date:

04/13/2015

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization - Unlimited Contributions

To Whom It May Concern:

This committee intends to make 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.

Respectfully submitted,

Treasurer's Name: SORNCHAI Adam Treasurer

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FEC FORM 1	STATEMENT OF ORGANIZATION	RECEIVED FEC MAIL CENTER 2015 APR 20 AM 7: 28 Office Use Only				
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	12FE4M5				
AN IN STRE	ETSURERRAC					
	I I I I I I I I I I I I I I I I I I I					
ADDRESS (number and stree	5070 NEWMANS CARDI	NETONED				
(Check if address is changed)						
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COMMITTEE'S E-MAIL AD	DRESS					
(Check if address is changed)	MAITINISTREFTSUTFIERRRAG	QGAAILCOM				
	Optional Second E-Mail Address					
COMMITTEE'S WEB PAGE						
2. DATE 0 4						
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 Trea	surer Adam Sornchai					
Signature of Treasurer	Defarden					
NOTE: Submission of false, e	rroneous, or incomplete information may subject the person signin ANY CHANGE IN INFORMATION SHOULD BE REPORTE					
Office Use Only	For further information Federal Election Comm Toll Free 800-424-9530 Local 202-694-1100					

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FEC Form 1 (Revised 02/2009)

Page 2

		OMMITTEE				
Can	Candidate Committee:					
(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. (Complete the candidate information below.)				
Nam Cand	e of didate					
	didate y Affiliatio	on Office State State District				
(c)	[]	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Canc	ie of didate					
Par	ty Corr	ımittee:				
(d)		This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party				
Poli	itical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a				
		Corporation Corporation w/o Capital Stock				
		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 segregated fund or party committee. (i.e., nonconnected committee)				
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Join	nt Fund	In addition, this committee is a Leadership PAC. (identify sponsor on line 6.)				
Join (g)	nt Func					
	nt Fund	Iraising Representative: This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political				
(g)		Iraising Representative: This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political				
(g)		Iraising Representative: This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
(g)	Com	Iraising Representative: This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate. mittees Participating in Joint Fundraiser				
(g)	Com 1.	Iraising Representative: This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate. mittees Participating in Joint Fundraiser FEC ID number				

FEC Form 1 (Rev	ised 02/2009)	Page 3					
Write or Type Committee	Name						
S. Name of Any Connec	ted Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor					
NOME							
Mailing Address							
]-[
	CITY STATE	ZIP CODE					
Relationship:	nected Organization Affiliated Committee	Leadership PAC Sponso					
	: Identify by name, address (phone number optional) and position of the person in p	cossession of committe					
books and records.							
Full Name							
Mailing Address							
Title or Position	CITY STATE	ZIP CODE					
TEEASURE							
	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).						
Full Name of Treasurer	AN BOORE SORNCHAIL						
Mailing Address	50701 HEWMARSICARDINGTOH EDI						
•							
	$\begin{array}{c c} C_{i} \not \leftarrow (\nabla_{i} \)_{i} \ & O_{i} \ $	<mark>ع ا اح - [9 او اع اع</mark> ZIP CODE					
Title or Position		2 1 0 - 3 5 8 2					
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FEC	Form	1	(Revised	02	/2009)	
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Full Name of					
Designated Agent			<u>i</u>		
Mailing Address					
	CITY				
	<u> </u>	Telephone number			
Banks or Other Depos safety deposit boxes or	sitories: List all banks or other depositorie maintains funds.	es in which the committee deposits fu	nds, holds accounts, rents		
Name of Bank, Depository, etc.					
L					
Mailing Address			• . <u></u>		
		STATE			
Name of Bank, Deposite					
Name of Bank, Deposit		STATE			
Name of Bank, Deposit					
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L.	ory, etc.				
L.	ory, etc.				

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TOLIN MANAN - DOMO 15 APR 2015 PW 7 L FEDERAL Election Commission WAShington, D.C. 20463 999 5 Street N.W. 00000 į CARDINGTON, 617 43215 . 0 OS 89A 210S 85 :F MA FEC MAIL CENTER

Federal Election ENVELOPE REPLACEMENT PAGE The FEC added this page to the end of th	E FOR INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail $\frac{4}{15}$	5 4/20/15
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
	Postmarked
USPS Priority Mail Express	
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Regis	Date of Receipt tration Office
Received from Senate Public Records (Date of Receipt Office
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
JA	4/20/15
PREPARER (3/2015)	DATE PREPARED