## STATEMENT OF

PAGE 1/5 =

FORM 1		ORGANIZ	'ATIO	N								
4 NAME OF		(0) 1 "				_			ce Use C	⊃nly		
<ol> <li>NAME OF COMMITTEE (ir</li> </ol>	n full)	(Check if name is changed)		iple:If typing the lines.	g, type	12F	E4M5	5				
EUROPEA	N CON	NTINENT PRO	FESS	IONAL	BAS	SEBA	LL I	LE <i>P</i>	GU	E		
			1 1 1		1 1 1	1 1 1	1 1	1 1	1 1 1	l I		
ADDRESS (number o		1900 WEST OAKLAND PA	RK BLVD.									
ADDRESS (number a	,	# 9961										
is changed		FORT LAUDERDALE				, FL		,3331	0			
		CITY A				STAT					ODE A	
		CITT				SIAI			2		ODE	
COMMITTEE'S E-MA	AIL ADDRES											
		USPoliticalActionCon	ımıttees@	⊉gmail.co ⊥	m 							
		Optional Second E-Mail A	ddress									
COMMITTEE'S WEB	PAGE ADD	DRESS (URL)										
		www.UnitedStatesPoliticalA	ctionComm	itteesDirecto	ry.com	1 1 1	1 1	1 1		l I	1 1	I
is onanged	-,											
_M	M / D											
2. DATE 1:	2 17	2015										
3. FEC IDENTIFIC	CATION NU	MBER ▶ C	C00597773									
4. IS THIS STATEM	MENT X	NEW (N) OR		AMEND	PED (A)							
certify that I have e	examined thi	is Statement and to the be	st of my kr	nowledge ar	nd belief it	t is true,	correct	t and	comple	te.		
Type or Print Name	of Treasurer	JOSH LAROSE										
Signature of Treasure	er <i>JOSH</i>	LAROSE		Electronically	v Filed]	Date	M 12	M /	17	] ′ [	201	
NOTE: Submission of		ous, or incomplete informatio ANY CHANGE IN INFORMA							enalties	of 2	U.S.C.	§437g.
Office				For further in Federal Election				F	EC	FOF	RM 1	

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530
Offig			Local 202-694-1100

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		OMMITTEE			
	naidate	Committee:			
(a)	Ш	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. (Compinformation below.)	lete the candidate		
	ne of didate				
	didate y Affiliatio	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District		
	ne of didate				
Par	rty Con	nmittee:	_		
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.		
Pol	itical A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nected 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)	NZ.	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg	gradated fund or party		
(f)	X	committee. (i.e., nonconnected committee)	regated fulld of party		
		In addition, this committee is a Lobbyist/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Joir	nt Fund	raising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political		
Committees Participating in Joint Fundraiser					
	1.	FEC ID number			
	2.	FEC ID number			
	3.	FEC ID number			
	4.				

Title or Position TREASURER

	_			_
	FEC <b>Form 1</b> (Revised (	)2/2009)		Page <b>3</b>
V	Vrite or Type Committee Name			. 3
ı	EUROPEAN CO	ONTINENT PROFESSION	NAL BASEBALL	LEAGUE
6.		Organization, Affiliated Committee, Joint Fundrai		
Ν	IONE			
L				
	Mailing Address			
		CITY	STATE	ZIP CODE
	Relationship: Connected	d Organization Affiliated Committee Joint Fo	undraising Representative	eadership PAC Sponsor
·.	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional)	and position of the person in po	ossession of committee
	JOSH LAF	:OSE		1
		1900 WEST OAKLAND PARK BLVD.		
	Mailing Address	# 9961		
		FORT LAUDERDALE	, , FL , ,33310	
	Title or Position	CITY	STATE	ZIP CODE
	PRESIDENT	Telep	ohone number 800	768   6650
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasussistant treasurer).	urer of the committee; and the n	ame and address of
	Full Name JOSH LAR of Treasurer	OSE		
	Mailing Address	1900 WEST OAKLAND PARK BLVD.		
		# 9961 		
		FORT LAUDERDALE	FL    33310	
		CITY	STATE	ZIP CODE

800

Telephone number

768

6650

FEC <b>For</b> n	n 1 (Revised 02/2009)	Page <b>4</b>				
Full Name of Designated Agent	nated JOSH LAROSE					
Mailing Address	1900 WEST OAKLAND PARK BLVD.					
<b>.</b>	# 9961					
	FORT LAUDERDALE  CITY  STATE  ZII	P CODE				
Title or Position CEO		8 6650				
safety deposit bo	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.					
	BANK OF AMERICA					
Mailing Address	701 BRICKELL AVENUE					
	MIAMI FL 33131					
	CITY STATE ZI	P CODE				
Name of Bank, I	Depository, etc.					
Mailing Address						
	CITY STATE ZI	P CODE				

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N5 H = C B

Form/Schedule: F1N Transaction ID:

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.

Form/Schedule: Transaction ID: