PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Graydon Good Government Committee 553 Lassing Way ADDRESS (number and street) (Check if address is changed) Walton 41094 KY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS angie@novemberstrategies.com (Check if address is changed) Optional Second E-Mail Address angiecain104@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.graydonhead.com (Check if address is changed) DATE 29 2016 C00610295 FEC IDENTIFICATION NUMBER 3. X 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. Mr Steve Goodin Type or Print Name of Treasurer Mr Steve Goodin [Electronically Filed] 02 29 2016 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page 2				
TYP	E OF C	OMMITTEE	1 ago 2				
Car	ndidate	lidate 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 Affiliati	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Nam Cand	e of didate						
Par	ty Con	Committee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	itical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected 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)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated 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 Func	Iraising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo or more political				
	Committees Participating in Joint Fundraiser						
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

 FEC Form 1 (Revis	ed 02/2009)	Page 3
Write or Type Committee N	ame	
Graydon Goo	d Government Committee	
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representat	tive, or Leadership PAC Sponsor
NONE		
1		<u> </u>
		<u> </u>
Mailing Address		<u> </u>
	CITY	E ZIP CODE
- · · · · · • • • • • • • • • • • • • •		
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representation	entative Leadership PAC Sponsor
Custodian of Decords	Identify by some address (shape sumber—antional) and notition of th	
books and records.	Identify by name, address (phone number optional) and position of th	е реголі її роззеззіон от сопініщее
	gie Cain	
Full Name	553 Lassing Way	
Mailing Address		
	Walton , KY	, 41094
Title or Position	CITY STATE	ZIP CODE
Custodian of records	Telephone number	859 - 802 - 7679
Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the commit g., assistant treasurer).	ttee; and the name and address of
Full Name Mr Ste	ve Goodin	
Mailing Address	511 Walnut Street	
	19th Floor	
	Cincinnati	45202
Title or Position	CITY STATE	ZIP CODE
Attorney/Partner	Telephone number	859 - 802 - 7679

FEC For n	n 1 (Revised 02/2009)	Page 4				
Full Name of Designated	Angie Cain					
Agent						
Mailing Address	553 Lassing Way					
	Walton KY 41094 CITY STATE ZII	P CODE				
Title or Position						
		2 7679				
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. Fifth Third Bank						
Mailing Address	340 Richwood Road					
	Walton KY 41094					
	CITY STATE ZI	P CODE				
Name of Bank, I	Depository, etc.					
Mailing Address						
	CITY STATE ZI	P CODE				