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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Rodney for Congress PO Box 344 ADDRESS (number and street) (Check if address is changed) Taylorville 62568-0344 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS chris@electioncfo.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://electrodney.com/ (Check if address is changed) DATE 2016 C00521948 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. Chris Marston Type or Print Name of Treasurer Chris Marston [Electronically Filed] 04 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

	-	1 (D. : 1 00/0000)	5. 0			
		rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE • Committee:				
(a)	X	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.)				
Name Cand		Rodney L Davis				
Cand Party	lidate Affiliati	on REP Office Sought: X House Senate President	State IL District 13			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand						
Part	Party Committee:					
(d)		(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Poli	tical A	ction Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization						
		Corporation Wo Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)		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 Fund	raising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.	FEC ID number				
	3.					
	4.					

FEC Form 1 (Revise	d 02/2009)	Page 3
Write or Type Committee Nat		T age •
Rodney for Co		
	d Organization, Affiliated Committee, Joint Fundraising Representati	ive. or Leadership PAC Sponsor
•		
Republicans inspiring	g Success & Empowerment Project (Rise Project)	<u> </u>
Mailing Address	PO Box 2485	
	Springfield VA	22152-0485
	CITY STATE	ZIP CODE
	eted Organization Affiliated Committee X Joint Fundraising Represe	
 Custodian of Records: Id books and records. 	dentify by name, address (phone number optional) and position of the	e person in possession of committee
Chris Ma	arston	
Full Name	PO Box 344	
Mailing Address		
	Taylorville , IL	62568-0344
	Taylorvine	
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	703 - 627 - 4679
5. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committed., assistant treasurer).	tee; and the name and address of
Full Name Chris Ma	arston	1
of Treasurer	UDO Pov 244	
Mailing Address	PO Box 344	
	Taylorville 	62568-0344
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	703 627 4679

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Full Name of Designated Agent							
Mailing Address							
	CITY STATE	ZIP CODE					
Title or Position							
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. Chain Bridge Bank							
Mailing Address	1445-A Laughlin Ave						
	McLean Z	22101					
_	CITY STATE	ZIP CODE					
Name of Bank, Depository, e	etc.						
BB and	1909 K Street, NW						
	Washington DC 1	20003					
	CITY STATE	ZIP CODE					

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. 249 Fifth Ave Mailing Address One PNC Plaza 15222 Pittsburgh CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Patriot Day II 2015 PO Box 9891 Mailing Address Arlington 22219-1891 **CITY** STATE 4 ZIP CODE Relationship: Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Connected Organization [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number