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FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	PEG MAIL GENTE
IGPE VILGTOR)	1 FUND CAL	LIFIOIRINI ANIS	FOR A	
PROSPEROUS	ECONOMY Y	<u> </u>	<u> </u>	
ADDRESS (number and street)	1P.O. BIOX 113			
(Check if address			11111	
Ll is changed)	BAKERSFILE	4D	CAL	
	·	СПУ	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one e-	mail address)		
(Check if address	Chrunnico	akarir com	1111	
is changed)			11111	
COMMITTEE'S WEB PAGE ADD) DRESS (URL)			
Charle if address				
(Check if address is changed)				
2. DATE 03 0'	1 ' à b ' à			4
3. FEC IDENTIFICATION NU	JMBER C	4	-Cto be	assigned)
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief	it is true, correct a	nd complete.
Type or Print Name of Treasurer	Corn. Brun	ni		
Signature of Treasurer	Combruni		Date 03	'01'2012
NOTE: Submission of false, errone	ous, or incomplete information ANY CHANGE IN INFORMATION			ne penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

(d)		This committee is a	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Part
Poli	tical A	ction Committee (PAC):		
(e)		This committee is a separate	segregated fund. (Identify connected organization	on line 6.) Its connected organization is
	-	Corporation	Corporation w/o Capital Sto	ck Labor Organization
		Membership Organiz	ation Trade Association	Cooperative
		In addition, th	is committee is a Lobbyist/Registraul PAC.	
(f)		This committee supports/opp committee. (i.e., nonconnecte	roses more than one Federal candidate, and is NO d committee)	CT a separate segregated fund or part
		In addition, this control	itte is a Lobbyist/Registrant PAC.	

Joint Fundraising Representative:

g)	X	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, st least one of which is an authorized committee of a fodural candidate.
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In addition, this committee is a Leadership PAC. (Identify spansor on line 6.)

(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political
	ш	committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraisor

1.	IVIAILIAD IAIOI	FOR	ICIONGRESSI	FEC ID number	COO	499	392
				2012-			- 10

2.	STRICKLAWIDL	IFIDIR!	CONGRES FEC ID number	C	00	5	16.	54:	5
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3. DIO WG LAMALIPH COMM INTER FEC ID NUM	er (<i>5 0</i>	Ò	5	00	7	42	9	_
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4.	D number C
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(a)

(b)

(c)

Name of Candidate

Party Committee:

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٧	Vrite or Type Committee Nam	e	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or L	sadership PAC Sponsor
L		1111111111111	
L			
	Mailing Address		
			<u> </u>
		CITY STATE	ZIP CODE
	Relationship: Connecte	od Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
7 .	Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the persor	n in possession of committee
	Full Name CON	NI BRUMMI	
	Mailing Address	15702 RUBICON AVE	
			<u> </u>
		BAKERSFIELD CA	7,331,41-1
	Title or Position	CITY STATE	ZIP CODE
	TRES	Telephone number	1-12011-14328
8.	Treasurer: List the name at any designated agent (e.g.,	nd address (phone number - optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
	Full Name of Treasurer	MI BRUNNI	
	Mailing Address	15702 RUBICON	
		BAKS RS FIELD CAT STATE	73314-
	Title or Position [TIRSIA: S.U.R.S.R.	Telephone number	1-12.011-14.3.28

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			·
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position		Telephone number	
Banks or Other Deposit safety deposit boxes or n Name of Bank, Depositor		n which the committee deposit	s funds, holds accounts, rents
CI	TITENS BUSINESS	BANK .	<u> </u>
Mailing Address	139111 GOFFEE 1	RA	
	BAKERSIFIELD	LA CA	1933081-
	CITY	STATE	ZIP CODE
Name of Bank, Depositor	ry, etc.		
لبينا		 	
Mailing Address			
		لبا لبيب	<u> </u>
	CITY	STATE	ZIP CODE

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