FEC FORM 1		STATEMEN ORGANIZ	-	Office Use Only						
1. NAME OF COMMITTEE (ir	ı full)	X (Check if name is changed)	Example:If typing, type over the lines.	12FE4M5						
CatholicVc	ote.org									
ADDRESS (number a	nd street)	PO Box 2709								
(Check if ad is changed)		Chicago		LL 60690						
			CITY	STATE ZIP CODE						
is change COMMITTEE'S WEB	PAGE ADD	RESS (URL)								
2. DATE	M / D 14	2012								
3. FEC IDENTIFIC	CATION NU	MBER C C	90011800							
4. IS THIS STATE	MENT X	NEW (N) OR	AMENDED (A)							
I certify that I have a		s Statement and to the best Joshua Mercer	of my knowledge and belief it	is true, correct and complete.						
Signature of Treasure	Joshua N er	<i>Nercer</i>	[Electronically Filed]	Date 04 / 15 / 2012						
NOTE: Submission of			may subject the person signing t ON SHOULD BE REPORTED W	his Statement to the penalties of 2 U.S.C. §43						
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100							

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TYPE OF (	COMMITTEE	
Candidat	te 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 candida information below.)	ite
Name of Candidate		
Candidate Party Affiliat	ation Office State Senate President District	_
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	mmittee:	
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.)	Par
Political A	Action Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organizati	on is
	Corporation Corporation w/o Capital Stock Labor Organiza	
	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 committee. (i.e., nonconnected committee)	par
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	idraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politica committees/organizations, at least one of which is an authorized committee of a federal candidate.	ıl
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politica committees/organizations, none of which is an authorized committee of a federal candidate.	ıl
Con	mmittees Participating in Joint Fundraiser	
1.	FEC ID number	_
2.	FEC ID number	_
3.	FEC ID number	_
4.	FEC ID number	

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Write or Type Committee Name

## CatholicVote.org

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6.

CATHOLICVOTE.OR	G POLITICAL ACTION COMMITT	EE	
Mailing Address	PO BOX 2709		
		IL 6	50690
	CITY	STATE	ZIP CODE
Relationship: X Connecte	d Organization Affiliated Committee Joint	Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	ntify by name, address (phone number optiona	l) and position of the persor	n in possession of committee
Joshua M	lercer		

Full Name	
Mailing Address	P.O. Box 2709
	_ [
	Chicago     IL     60690       IL     -     -
Title or Position	CITY STATE ZIP CODE
Assistant Treasurer	Telephone number     231     -     330     8238

8. 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	Brian Burch
Mailing Address	PO BOX 2709
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number       312       -       201       6559

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Full Name of Designated Agent																	I										
Mailing Address																											
																				L							
							CI	ΓY								ST/	λΤΕ					ZI	ΡC	DE			
Title or Position																											
											Tel	eph	ione	e ni	umt	ber											

9. 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.

	JP Chase Morgan	
Mailing Address	PO BOX 659754	
	San Antonio	TX 78265
	CITY	STATE ZIP CODE
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE