FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. AmericanValues PAC PO Box 457 ADDRESS (number and street) (Check if address is changed) Elizabeth 07207 NJ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS amerpac@earthlink.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00611517 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. Roger Cowles Type or Print Name of Treasurer Roger Cowles [Electronically Filed] 03 10 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

Local 202-694-1100

FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE OF C		<u>-</u>
(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. (Corinformation below.)	nplete the candidate
Name of Candidate		
Candidate Party Affiliati	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con	nmittee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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 scommittee. (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.)	
Joint Fund	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	

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Write or Type Committee Nar		
AmericanValue		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
NONE		
Mailing Address		
Maining Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization	Leadership PAC Sponsor
 Custodian of Records: Id books and records. 	entify by name, address (phone number optional) and position of the person in	possession of committee
Roger C	owles	
Mailing Address	PO Box 457	
Walling Address		
	Elizabeth NJ 0720)7
Title or Position	CITY STATE	ZIP CODE
Secretary/Treasurer	Telephone number 201	724 - 7131
Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and the , assistant treasurer).	e name and address of
Full Name Roger Co	owles	
Mailing Address	PO Box 457	
	Elizabeth NJ 0720	7
Title or Position	CITY STATE	ZIP CODE
Secretary/Treasurer	Telephone number	724 - 7131

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit boxes or		
safety deposit boxes or Name of Bank, Deposit	r maintains funds.	
safety deposit boxes or Name of Bank, Deposi	r maintains funds. itory, etc. Bank 995 Morris Avenue	
safety deposit boxes or Name of Bank, Deposi	r maintains funds. itory, etc. Bank	07083
safety deposit boxes or Name of Bank, Deposi	r maintains funds. itory, etc. Bank 995 Morris Avenue	
safety deposit boxes or Name of Bank, Deposi	maintains funds. Itory, etc. Bank 995 Morris Avenue Union NJ CITY STATE	07083
safety deposit boxes or Name of Bank, Deposit TD Mailing Address	maintains funds. Itory, etc. Bank 995 Morris Avenue Union NJ CITY STATE	07083
safety deposit boxes or Name of Bank, Deposit TD Mailing Address	maintains funds. Itory, etc. Bank 995 Morris Avenue Union NJ CITY STATE	07083
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safety deposit boxes or Name of Bank, Deposit TD	maintains funds. Itory, etc. Bank 995 Morris Avenue Union NJ CITY STATE	07083

: 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCFHz G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: F1N Transaction ID:

Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raised in unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees

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