FEC

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. Brianna Wu for Congress 689 Main St. No. 302 ADDRESS (number and street) (Check if address is changed) Walpole 02081 MA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS administrator@briannawu2018.com (Check if address is changed) Optional Second E-Mail Address frank@briannawu2018.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00633669 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. Wu, Frank, , , Type or Print Name of Treasurer Wu, Frank,,, [Electronically Filed] 02 2017 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

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TYPE OF COMMITTEE	_
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below	ow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (C information below.)	complete the candidate
Name of Candidate Wu, Brianna, , Ms.,	
Candidate Office Party Affiliation DEM Sought: Precident	State
Party Affiliation DEM Sought: X House Senate President	District 08
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	connected 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 committee. (i.e., nonconnected committee)	e segregated 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 Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 fo committees/organizations, none of which is an authorized committee of a federal candidate.	r two or more political
Committees Participating in Joint Fundraiser	
1.	
2.	
3.	
4.	

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Write or Type Committee Name		
Brianna Wu for	Congress	
	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
NONE		
Mailing Address		
Ü		
	CITY STATE Z	IP CODE
		ership PAC Sponsor
 Custodian of Records: Iden books and records. 	tify by name, address (phone number optional) and position of the person in posse	ession of committee
Wu, Frank,	,,	
Full Name	689 Main St. No. 302	
Mailing Address		
	Walpole MA 02081	
Title or Position	CITY STATE Z	P CODE
Campaign Treasurer	Telephone number 408 – 56	692298
. Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and the name ssistant treasurer).	e and address of
Full Name Wu, Frank, of Treasurer	,, 	
Mailing Address	689 Main St. No. 302	
	Walpole MA 02081	
Title or Position Campaign Treasurer	CITY STATE ZI	P CODE 59 - 2298

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit b	er Depositories: List all banks or other depositories in which the committee deposits function of maintains funds. Depository, etc.	
safety deposit b	Depository, etc. TD Bank, N.A. 32 Chestnut St.	
safety deposit b Name of Bank,	Depository, etc. TD Bank, N.A.	
safety deposit b Name of Bank,	Depository, etc. TD Bank, N.A. 32 Chestnut St.	04243
safety deposit b Name of Bank,	Depository, etc. TD Bank, N.A. 32 Chestnut St. P.O. Box 1377	
safety deposit b Name of Bank, Mailing Address	Depository, etc. TD Bank, N.A. 32 Chestnut St. P.O. Box 1377 Lewiston ME	04243
safety deposit b Name of Bank, Mailing Address	Depository, etc. TD Bank, N.A. 32 Chestnut St. P.O. Box 1377 Lewiston ME CITY STATE	04243
safety deposit b Name of Bank, Mailing Address	Depository, etc. TD Bank, N.A. 32 Chestnut St. P.O. Box 1377 Lewiston ME CITY STATE	04243 ZIP CODE
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