

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
2014 SEP -9 AM 9:24
FEC MAIL CENTER
Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Cory Hoffman For Congress

ADDRESS (number and street)

323 Laurel Rd.

(Check if address is changed)

Huron

OH

44839

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

coryhoffmanforcongress@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

coryhoffmanforcongress.com


2. DATE 08th / 8th / 2014^Y

3. FEC IDENTIFICATION NUMBER C00556456

4. 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.

Type or Print Name of Treasurer Cory Hoffman

Signature of Treasurer 

Date 08th / 08th / 2014^Y

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
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Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

5. TYPE OF COMMITTEE

Candidate 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 candidate information below.)

Name of Candidate Cory Hoffman

Candidate Party Affiliation **IND** Office Sought: House Senate President State **OH** District **09**

- (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 segregated fund or party committee. (i.e., nonconnected committee)
 - 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 two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

110101100110011001

Write or Type Committee Name

Cory Hoffman For Congress

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

Mailing Address _____

_____ - _____

CITY STATE ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

Full Name **Cory Hoffman** _____

Mailing Address **323 Laurel Rd.** _____

Huron _____ **OH** _____ **44839** - _____

CITY STATE ZIP CODE

Title or Position _____

Candidate _____ Telephone number **419** - **602** - **0323** _____

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 **Cory Hoffman** _____

Mailing Address **323 Laurel Rd.** _____

Huron _____ **OH** _____ **44839** - _____

CITY STATE ZIP CODE

Title or Position _____

Candidate/Treasurer _____ Telephone number **419** - **602** - **0323** _____

143011001100110011

Full Name of Designated Agent

Cory Hoffman

Mailing Address

323 Laurel Rd.

Huron

CITY

OH

STATE

44839

ZIP CODE

Title or Position

Candidate

Telephone number

419 - 602 - 0323

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.

KeyBank

Mailing Address

601 Cleveland Rd. West

Huron

CITY

OH

STATE

44839

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

NOTHING TO REPORT

UNITED STATES POSTAL SERVICE

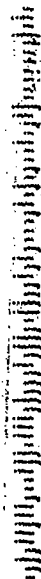
Cory D. Hoffmann
323 Laurel Rd
Huron, OH 44839

AUG 30
11:30 AM



Federal Election Commission
999 E Street, NW
Washington, DC 20463

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2014 SEP -9 AM 9:24
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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

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8/30/14

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No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


PREPARER
(8/2013)

9/9/14
DATE PREPARED

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