

FORM 1		ORGANIZA	ATION	1	EC MAIL GENTER
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4N	
CommiTI	166 17	io Elect 1	- IQI i me IVI AISIQIU	162 F	01R1 1C01N161R1E1S1S
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ADDRESS (number a	nd street)	8 8 4 2 S VA	WINDR	<u> </u>	· · · · · · · · · · · · · · · · · · ·
(Check if address is changed)			Ministration (Control of Control		
		Tuesion		A 2	815736-
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA	IL ADDRES	S (Please provide only one e	-mail address)		
(Check if	address	Pending			
is change				<u> </u>	
COMMITTEE'S WEB	PAGE ADD	PRESS (URL)			
(Charlet	address	PENding	<u> </u>		
is change			<u> </u>	1 1 1 1	
2. DATE	2 2.			e ali	Million o
3. FEC IDENTIFIC	CATION NU	MBER C			
. 4. IS THIS STATE	MENT D	NEW (N) OR	AMENDED (A)		
I certify that I have e	examined th	is Statement and to the best	of my knowledge and belief i	t is true, corre	ect and complete.
Type or Print Name	of Treasurer	Jaime	A. VASQUE		
Signature of Treasure		Jane 4.1	Lasque	Date 1	2 20 2041
NOTE: Submission of		·	may subject the person signing ON SHOULD BE REPORTED V		to the penalties of 2 U.S.C. §437g.
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

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TYPE OF COMMITTEE						
Candidate Committee:						
(a)	M	This committee is a principal campaign committee. (Complete the candidate information below	<i>i.</i>)			
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Coninformation below.)	mplete the candidate			
Name Cand		Jaime Altredo Vasquez				
Cand Party	idate Affiliati	on REP Office Sought: House Senate President	State A.Z.			
(c)	Q [*]	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand		Jaine Alfreda Vasquez !!!!!!				
Part	y Con	nmittee:				
(d)	V	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Polit	lical A	ction Committee (PAC): N/4-				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is a:			
		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)	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.)				
Join	t Func	Iraising Representative: NA				
(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	two or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political			
	Com	emittees Participating in Joint Fundraiser				
	\					
	1.					
	2.	FEG ID number C				
	3.	FEC ID number				
	4.	FEC ID number C				

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Write or Type Committee Name		
CommiTTEE	TO Elect Jaime VASOUEZ FOR	CON GRESS
	Organization, Affiliated Committee, Joint Fundraising Representative, or L	
NA		
	<u> </u>	
		
Mailing Address		
	1	1-1
	CITY STATE	ZIP CODE
—		m
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
		
 Custodian of Records: Idea books and records. 	ntify by name, address (phone number optional) and position of the persor	n in possession of committee
Full Name Juli	MIC A Vasquez	
Mailing Address	818142 51 Vain DR.	
	TIVICISION 1	8,5,7,3,6 -
Title or Position	CITY STATE	ZIP CODE
	, —	
<u>Caudidate</u>	Telephone number 5.2.0	0-302-2344
8. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
Full Name of Treasurer	nie Altredo Vasquiez	
Mailing Address	81814124 151 18161 DIR	
_	1	
	[[UCISION 1/2] 1/2 1/2	8,5,73,6-1
	CITY STATE	ZIP CODE
Title or Position	Telephone number 5.2.6	9-13-0-2-23-44
Calabia BALLANTI, ICI	(- Wisian Charles

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. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt** 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 or Postmarked Other (Specify): 12/29/1 PREPARER DATE PREPARED