

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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FEC MAIL CENTER

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

N.E.X.T. Leadership Generation (NLG), Inc. PAC

ADDRESS (number and street)

P.O. Box # 1358

(Check if address is changed)

Mentor

CITY ▲

OH

STATE ▲

44061

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Vashonmc2005@yahoo.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

03 05 2013

3. FEC IDENTIFICATION NUMBER ►

C 00411579

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

VASHON MCINTYRE

Signature of Treasurer

VASHON MCINTYRE

Date

03 05 2013

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

FEC FORM 1
(Revised 06/2012)

13031071985

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 _____

Candidate Party Affiliation _____ Office Sought: House Senate President State _____ District _____

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a **NAT** (National, State or subordinate) committee of the **REP** (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**

13031071986

Write or Type Committee Name

N.E.X.T. Leadership Generation (NLG), Inc. PAC

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

N.E.X.T. Leadership Generation (NLG), Inc.

Mailing Address

P.O. Box # 1358

Mentor

OH

44061

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

VASHON MCINTYRE

Mailing Address

P.O. Box # 1358

Mentor

OH

44061

Title or Position

CITY

STATE

ZIP CODE

Owner & Founder

Telephone number

347-717-6437

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

VASHON MCINTYRE

Mailing Address

36 SOUTH MAIN STREET

PEARL RIVER

NY

10965

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

845-735-9500

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N.E.X.T. Leadership Generation (NLG), Inc. DAC

Full Name of Designated Agent

VASHON MCINTYRE

Mailing Address

38 SOUTH MAIN STREET

PEARL RIVER

CITY

NY

STATE

10965

ZIP CODE

Title or Position

Designated Agent

Telephone number

845-735-9500

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.

Trustco Bank

Mailing Address

Wolf Road office

34 Wolf Road

Albany

CITY

NY

STATE

12205

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

13031071988

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

USPS First Class Mail Postmarked
5/18/13

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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

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Other (Specify): Date of Receipt or Postmarked

JMP
PREPARER

5/23/13
DATE PREPARED

13031071989