Image# 201508219000927035							
FEC FORM 1	STATEMEN ORGANIZ			PAGE 1 / 5 🕳			
			Offi	ce Use Only			
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5				
Committee to El	ect Samuel						
ADDRESS (number and street)	2650 Perrysville Ave						
(Check if address							
is changed)	Pittsburgh		PA 11521	4			
			STATE				
COMMITTEE'S E-MAIL ADDF							
<ul> <li>(Check if address is changed)</li> </ul>	samuelhurt1@gmail.co	<b>™</b> 					
	Optional Second E-Mail Add	dress					
<ul> <li>(Check if address is changed)</li> </ul>		ges/Committee-To-Elect-Samue					
	D / Y Y Y Y 2015						
B. FEC IDENTIFICATION I	NUMBER ► C C	00584375					
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)					
certify that I have examined	this Statement and to the best	of my knowledge and belief i	t is true, correct and	complete.			
Type or Print Name of Treasu	rer Julinda Fisher						
Signature of Treasurer Jul. —	nda Fisher	[Electronically Filed]	Date 08	21 / Y Y Y 2015			
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED \		enalties of 2 U.S.C. §437			
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)			

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			OMMITTEE						
0	Canc	didate	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 Candio		Rabbi Samuel Levi Hurt						
	Candio Party	date Affiliatio	on W Office Sought: House Senate President District						
(	c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name Candio								
	Party	/ Con	imittee:						
(	d)		This committee is a       (National, State or subordinate) committee of the       (Democratic, Republican, etc.) Party.						
F	Politi	ical A	ction 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.)						
J	oint	Fund	raising Representative:						
(g	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	1)		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.						
		Com	mittees Participating in Joint Fundraiser						
		1.	FEC ID number						
		2.	FEC ID number						
		3.	FEC ID number						
		4.	FEC ID number						

FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

## Committee to Elect Samuel

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

Mailing Address								
	CITY	STATE	ZIP CODE					
Relationship: Connecte	d Organization Affiliated Committee	Joint Fundraising Representa	tive Leadership PAC Sponsor					
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>								
Julinda Fi	sher							
Mailing Address	2650 Perrysville Ave							
	Pittsburgh	PA	15214					
Title or Position	CITY	STATE	ZIP CODE					
Campaign M'gr/Treasu		Telephone number	.12					

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 Julinda F	-isher
Mailing Address	2650 Perrysville Ave
	Pittsburgh         PA         15214
	CITY STATE ZIP CODE
Title or Position Campaign M'gr/Treasu	Image: Telephone number     412     323     0284

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Rabbi Samu	el L Hurt						1		1 1	1 1 1		
Mailing Address		2650 Perrysville Ave											
		Pittsburgh							PA		15214		
			CITY					ç	STATE			ZIP CODE	
Title or Position Presid'tl Candida	ate			]		Telep	hone i	numb	er	4	12	320	0384

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.

First	Niagara Bank		
Mailing Address	McKnight Rd		
	Pittsburgh	PA 15214 – – – – – – – – – – – – – – – – – – –	
	CITY	STATE ZIP CODE	
Name of Bank, Depositor	, etc.		
Mailing Address			
	CITY	STATE ZIP CODE	

## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

As Candidate for President, 2016, I haven't asked or accepted any monies from any individuals, corporations, super packs, or special interest groups! However, since I'm new to this, if any monetary funds can be allotted to my campaign from the Federal Election Commission or Government, please inform me

Form/Schedule: Transaction ID: