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FEC FORM 1			TATEM RGANI								Offic	e Use (Only			
NAME OF COMMITTEE (in	n full)	,	Check if name changed)		Example over the		ng, type)	12F	E4M) 			
Jack Orsw	ell for	Cong	ress													
		.888 S. F	igueroa St., Su	ite 860												
ADDRESS (number a	nd street)															
(Check if ac is changed)		Los Ang	eles						CA		9001	7				
				CIT	Υ				STATE			ZIF	, COI	DE		
COMMITTEE'S E-MA	IL ADDRE	SS (Please	provide only or	ne e-ma	il addres	ss)										
- (0) 1 "		tlecpas	@aol.com													
(Check if is change		1		1 1		1 1		1 1	1 1	1 1	1 1	1 1		1 1	1 1	
COMMITTEE'S WEB	PAGE AD	DRESS (UI	₹L)													
(Check if																
is change	d)															
2. DATE 03	M / D 0	D / Y	2012													
3. FEC IDENTIFIC	CATION N	UMBER	C	C005	13838											
4. IS THIS STATEM	MENT X	NEW	(N) OR	ł		AMEN	DED (A	A)								
I certify that I have e	examined ti	his Stateme	nt and to the	best of	my knov	vledge .	and bel	ief it i	s true,	correc	t and o	comple	te.			
Type or Print Name	of Treasure	r William	R. Turner													
Signature of Treasure	Willian er	n R. Turner			[El	ectronic	ally File	d] _[Date	03	M /	01	1	Y Y 20	012	Y
NOTE: Submission of	false, erron		omplete informa									enalties	of 2	U.S.C	. §43	7g.
Office					For	further	informati		ntact:		F	EC	FOF	—— ₹M 1		

Office			For further information contact:	FEC FORM 1
Use			Federal Election Commission Toll Free 800-424-9530	(Revised 02/2009)
 Only			Local 202-694-1100	(Neviseu 02/2009)

FEC F	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE e Committee:	
(a) X	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. (Compinformation below.)	lete the candidate
Name of Candidate	Jack Orswell	
Candidate Party Affilia	tion REP Office Sought: X House Senate President	State CA District 27
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		Democratic,
(d)	· · ·	Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	ected 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 seg committee. (i.e., nonconnected committee)	regated 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 Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number C	
2.	FEC ID number	
3.	FEC ID number C	
4		

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Write or Type Committee	Name	
Jack Orswell	for Congress	
6. Name of Any Connec	ted Organization, Affiliated Committee, Joint Fundraising Representative	ve, or Leadership PAC Sponsor
None		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conr	Affiliated Committee Joint Fundraising Represen	ntative Leadership PAC Sponsor
Custodian of Records: books and records.	: Identify by name, address (phone number optional) and position of the	person in possession of committee
Willia Full Name	nm R. Turner	
Mailing Address	888 S. Figueroa St., Suite 860	
	Los Angeles CA	90017
Title or Position	CITY STATE	ZIP CODE
Custodian of Records		213 627 7494
3. Treasurer: List the nam any designated agent (6	ne and address (phone number optional) of the treasurer of the committee.g., assistant treasurer).	ee; and the name and address of
Full Name Willia of Treasurer	m R. Turner	
Mailing Address	888 S. Figueroa St., Suite 860	
	Los Angeles CA	90017
Title or Position _I Treasurer	CITY STATE	ZIP CODE 213 627 7494
<u> </u>	Telephone number	

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Full Name of Designated Agent	None	
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	SIAIL	
Mailing Address		
	Los Angeles CA 90017	
	CITY STATE	ZIP CODE
Name of Bank,	Depository, etc.	
Mailing Address		