FEC FORM 1	STATEMENT OF ORGANIZATION	RECEIVED FEC MAIL CENTER 2016 JUL -8 AM 9:47

Office Use Only

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

Protecting Your Freedom

ADDRESS (number and street)   **7273 65th Drive**

☐ (Check if address is changed)

Live Oak   **FL**   **32060** -

CITY   STATE   ZIP CODE

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

☐ (Check if address is changed)   **stevecrapps@yahoo.com**

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)   **stevecrappsforcongress.com**

2. DATE   **07** / **5** / **2016**

3. FEC IDENTIFICATION NUMBER   **C**

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   **Steve Crapps**

Signature of Treasurer _____   Date   **07** / **05** / **2016**

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 Use 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 |＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿|

Candidate
Party Affiliation **DEM**   Office
Sought: ☒ House   ☐ Senate   ☐ President   State **FL**

District **02**

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

Name of
Candidate **Steve Crapps**

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**

Write or Type Committee Name

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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: Steve Crapps

Mailing Address: 7273 65th Drive

Live Oak   FL   32060 -

Title or Position   CITY   STATE   ZIP CODE

Candidate   Telephone number 386 - 590 - 1459

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: Steve Crapps

Mailing Address: 7273 65th Drive

Live Oak   FL   32060 -

CITY   STATE   ZIP CODE

Title or Position

Candidate   Telephone number - -

Left margin vertical text: 2016-07-08-03-00080000554

Full Name of
Designated
Agent   Steve Crapps

Mailing Address   7273 65th Drive

Live Oak   FL   32060 -

CITY   STATE   ZIP CODE

Title or Position

Candidate   Telephone number ___-___-___

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.

Columbia Bank

Mailing Address   4785 West US Highway 90

Lake City   FL   32055 -

CITY   STATE   ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY   STATE   ZIP CODE
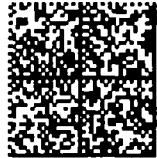
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Federal Election Commission
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_BW_

PREPARER

07-08-2016

DATE PREPARED

(3/2015)

2016-07-08-03-0000000057