

FEC
FORM 1STATEMENT OF
ORGANIZATION

RECEIVED

2014 JUN 19 AM 10:33
Office Use Only

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

12FE4M5 FEC MAIL CENTER

Friends of Zach Dasher

ADDRESS (number and street)

949 Hwy. 144

- (Check if address is changed)

Calhoun

CITY ▲

LA

STATE ▲

71225

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

- (Check if address is changed)

info@zachdasher.com

Optional Second E-Mail Address

dasher@redcurve.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

- (Check if address is changed)

www.zachdasher.com

2. DATE

MM / DD / YYYY
06 / 13 / 2014

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 Caleb Crosby

Signature of Treasurer

Caleb Crosby



Date

MM / DD / YYYY
06 / 17 / 2014

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
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100FEC FORM 1
(Revised 06/2012)

14031350055

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

Zach Dasher

Candidate Party Affiliation

REP

Office Sought:

☒

House

☐ Senate☐ President

State

LA

District

05

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

Name of Candidate

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.	<input type="text"/>	FEC ID number	C
2.	<input type="text"/>	FEC ID number	C
3.	<input type="text"/>	FEC ID number	C
4.	<input type="text"/>	FEC ID number	C

14031250056

Write or Type Committee Name

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

NONE

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

Bradley T Crate

Mailing Address

500 Cummings Center

Suite 4400

Beverly

MA

01915

Title or Position

CITY

STATE

ZIP CODE

Asst. Treasurer

Telephone number

617

848

8887

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

Caleb Crosby

Mailing Address

949 Hwy. 144

Calhoun

LA

71225

Title or Position
Treasurer

CITY

STATE

ZIP CODE

Telephone number

617

848

8887

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

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.

Chain Bridge Bank

Mailing Address

1445-A Laughlin Avenue

McLean

VA

22101

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

14031250058

6/13/2014

FedEx Ship Manager - Print Your Label(s)

From: (617) 231-4353
Caleb Crosby

Origin ID: BHMA

FedEx
Express

3724 Dunbarton Drive

MOUNTAIN BROOK, AL 35223



J14101402070326

SHIP TO: (202) 694-1000

BILL SENDER

FEC

Federal Election Commission

999 E ST NW

WASHINGTON, DC 20463

Ship Date: 13JUN14

ActWgt: 0.1 LB

CAD: 105653717/NET3490

Delivery Address Bar Code



Ref #

Invoice #

PO #

Dept #

MON - 16 JUN 10:30A
PRIORITY OVERNIGHT

TRK# 7703 0111 5613

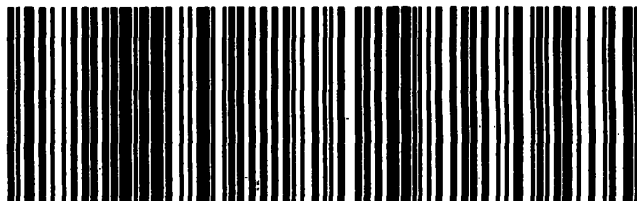
0201

XC RDVA

20463


DC-US

IAD



522050004F220

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date 6/13/14
	Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (8/2013)	6/19/14 DATE PREPARED

14031250060