FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Midnight Sun Political Action Committee PO Box 27814 ADDRESS (number and street) (Check if address is changed) Washington 20038 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS llindamidnightsun@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00345199 FEC IDENTIFICATION NUMBER > 3. X 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. Harrigan, Linda, , , Type or Print Name of Treasurer Harrigan, Linda, , , [Electronically Filed] 09 2017 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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		OMMITTEE	
Can	ndidate	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. (Compleinformation below.)	ete the candidate
Nam Cand	e of didate		
	didate / Affiliation	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Com	nmittee:	
(d)			emocratic, epublican, etc.) Party.
Poli	tical A	ction 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	_abor 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 segrecommittee. (i.e., nonconnected committee)	egated 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.)	
Join	t Fund	raising 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.	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.	or more political
	Comi	mittees Participating in Joint Fundraiser	
		FEC ID number	
	1.		
	2.		
	3.	FEC ID number C	
	4.	FEC ID number C	

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Write or Type Committee Name	J
Midnight Sun Political Action Committee	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
Young, Donald, , ,	
2314 Rayburn HOB Mailing Address	
Washington DC CITY STATE	20515
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representa	ative x Leadership PAC Sponsor
. Custodian of Records: Identify by name, address (phone number optional) and position of the perbooks and records.	erson in possession of committee
Harrigan, Linda, , , Full Name 8621 Blossom Point Road Mailing Address	
Welcome	20693
Title or Position CITY STATE	ZIP CODE
Custodian Telephone number	301 - 752 - 8328
B. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; any designated agent (e.g., assistant treasurer).	and the name and address of
Full Name Harrigan, Linda, , , of Treasurer	
Mailing Address 8621 Blossom Point Road	
Welcome	20693
CITY STATE Title or Position Treasurer Telephone number	ZIP CODE 801 - 752 - 8328

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit be Name of Bank,		olus accounts, Terits
safety deposit be	Depository, etc. Bank of America 201 Pennsylvania Ave SE	3-5118
safety deposit be Name of Bank,	Depository, etc. Bank of America 201 Pennsylvania Ave SE	
safety deposit be Name of Bank,	Depository, etc. Bank of America 201 Pennsylvania Ave SE Washington DC 2000	3-5118
safety deposit be Name of Bank, Mailing Address	Depository, etc. Bank of America	3-5118
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America	3-5118
safety deposit be Name of Bank, Mailing Address	Depository, etc. Bank of America	3-5118
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America	3-5118
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America	3-5118