FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED
2012 AUG 13 AM 8:21
FEGRIND OPPOSITE

FORM 1		Ollan				FEGRIDAN SERVICE NIER
1. NAME OF COMMITTEE (in	n full)	(Check if na is changed)		ample:If typing, type er the lines.	12FE4M	15
Fight for th	e Dre	am .				
ADDRESS (number a	: and street)	1636 Nort	h Ceda	r Crest Boule	evard	
(Check if a is changed)		Allentown			PA	18104
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MA	AIL ADDRES	SS (Please provide on				
(Check if is change		waynewo	odman(	@gmail.com	;; [*-1 : 1 1 1	
COMMITTEE'S WEE	B PAGE ADI	DRESS (URL)			THE AT PROPERTY OF	oner and a second of the secon
(Check if is change						
2. DATE 08	3 <sup>m</sup> ′ 3	° ′2012 ′	(Marie Marie)	3 SA.		
3. FEC IDENTIFIC	CATION N	JMBER	C 0051	9793		•
4. IS THIS STATE	MENT	NEW (N)	OR 2	AMENDED (A)		
I certify that I have	examined th		•	knowledge and belief it	is true, corre	ect and complete.
Type or Print Name	of Treasure	Robert H	leimbac	her		
Signature of Treasur		All (	/ John Too		Date Ö	8" ′ 03° ′ 2012 `
NOTE: Submission of				ubject the person signing the OULD BE REPORTED WI		to the penalties of 2 U.S.C. §437g.
Office Use				For further information of Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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TYPE OF C		-
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. (Con information below.)	nplete the candidate
Name of Candidate		1 1 1 1 1 1 1 1 1
Candidate Party Affiliation	Office Sought: House Senate President	State  District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Com	nmittee:	
(d)	(National, State  This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	ction Committee (PAC):	. =
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
	Corporation Wo Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	Cooparative
(f) 🔀	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lebbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	Iraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number C	•
2.	FEC ID number C	
3.	FEC ID number C	
4.		

	, , , , , , , , , , , , , , , , , , ,
Write or Type Committee Na	me .
Fight for the Dr	eam
6. Name of Any Connected	I Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
	<u> </u>
Mailing Address	
	CITY STATE ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
	· · · · · · · · · · · · · · · · · · ·
<ol> <li>Custodian of Records: In books and records.</li> </ol>	dentify by name, address (phone number optional) and position of the person in possession of committee
Full Name Anth	ony J. Ferate
Mailing Address	723 Willow Run
	Yukon OK 73099 -
Title or Position	CITY STATE ZIP CODE
Attorney/Asst.	Telephone number [202] - [486] - [7211]
8. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; and the name and address of ., assistant treasurer).
Full Name of Treasurer	ert Heimbacher
Mailing Address	1636 North Cedar Crest Boulevard
·	
	Allentown PA 18104
Title or Position	CITY STATE ZIP CODE  Telephone number
1	

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Full Name of Designated Agent	<sub>ι</sub> Wayne, Woodman	
Mailing Address	1636 North Cedar Crest Drive	
	Allentown PA [1	8104   -
Title or Position	Telephone number	J-L
- '	oxes or maintains funds. Depository, etc.	
Name of Bank,	Wells Fargo, N.A.	
- '	Wells Fargo, N.A.	
Name of Bank,	Wells Fargo, N.A.	
Name of Bank,	Wells Fargo, N.A.  702 West Hamilton Street	ZIP CODE
Name of Bank,	Wells Fargo, N.A.  702 West Hamilton Street  Allentown  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Wells Fargo, N.A.  702 West Hamilton Street  Allentown  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  Wells Fargo, N.A.  702 West Hamilton Street  [Allentown]  CITY STATE  Depository, etc.	ZiP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Wells Fargo, N.A.  702 West Hamilton Street  [Allentown]  CITY STATE  Depository, etc.	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Wells Fargo, N.A.  702 West Hamilton Street  [Allentown]  CITY STATE  Depository, etc.	ZIP CODE

(3/2005)

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