

Amended

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED

2014 APR 15 AM 10:35

Office Use Only

ELECT MAIL CENTER

1. NAME OF
COMMITTEE (in full)

☒ (Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

REGGIE FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 14826

☐ (Check if address
is changed)

LENEXA

CITY ▲

KS

STATE ▲

66285

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address
is changed)

reggieforcongress@gmail.com

Optional Second E-Mail Address

reggiemarselus@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address
is changed)

www.reggieforcongress.com

2. DATE

04 ' 05 ' 2014

3. FEC IDENTIFICATION NUMBER ►

C

H4K503170

4. IS THIS STATEMENT

NEW (N)

OR

A

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

Reginald W. Marsehus

Signature of Treasurer

Reginald W. Marsehus

Date

04 ' 05 ' 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
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

14031213082

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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

Reginald W. MARSELU

Candidate Party Affiliation

DEM

Office Sought:

☒

House

Senate

President

State

KS

District

03

- (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. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

14031213083

Write or Type Committee Name

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

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

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

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

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Full Name of
Designated
Agent

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

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.

Wells Fargo

Mailing Address

12000 W 95

Lenexa

KS

66215

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

14031213085

12115 W. 93
Lenexa, KS 66215-3831

14031213086

F	
USPS® FIRST-CLASS MAIL®	
SHIP TO:	010 1002
WASHINGTON DC 20463	
ZIP	(420) 20463

Federal Election Commission
999 E Street NW
Washington, D.C. 20463

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☐ Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery ☐
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
PREPARED <i>ASD</i> 4/15/14 DATE PREPARED	

(8/2013)

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