LAUGHLIN FOR PRESIDENT

RECEIVED

2011 DEC 28. AM 11: 18
FEC MAIL CENTER

December, 22, 2011

Federal Elections Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization - Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures and, consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Phyllis E. Dubrow, Treasurer

11030701088

FEC FORM

STATEMENT OF ORGANIZATION

RECEIVED

2011 DEC 28 AM 11: 18

FORIN I						550 50	WILLI 10
	<u> </u>					- Office Use Onl	CENTER
1. NAME OF COMMITTEE (ii	n full)	(Check if name is changed)		mple:If typing, type the lines.	12FE4M	5	- orivicit
Laughlin 1	for Pr	esident		<u>. I . I . I . I . I . I . I</u>			
<u> </u>	<u> </u>	<u> </u>	1111	<u> </u>		1 1 1 1 1	
ADDRESS (number a	and street)	812 Grand	Stree	et, Apt. 3L	<u> </u>		
(Check if a is changed		Brooklyn		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	NY	11211	J-L
			CITY		STATE	ZIP	CODE
COMMITTEE'S E-M	AIL ADDRE	SS (Please provide only					
Check if	address	manager(<u> w</u> laug	nlinforpres	ident,c	om , ,	
is change			<u> </u>	<u> </u>	1 1 1 1		
COMMITTEE'S WEI	R PAGE AD	DRESS (LIBL)					
COMMITTEES WE	o rage ab	www.laug	hlinfor	president.	com		ı
(Check if is change							
2. DATE 12	2 ' 22	2 2011					
3. FEC IDENTIF	ICATION N	UMBER C		interval annuallia cert (m.c. 22) mania			
4. IS THIS STATE	EMENT	NEW (N) O	OR	AMENDED (A)			
I certify that I have	examined t	this Statement and to the	e best of my	knowledge and belief	it is true, corre	ect and complete	9.
Type or Print Name	of Treasure	Phyllis E.	Dubr	ow			
Signature of Treasu	rer	Heller Vy	8405		Date 1	2 22	2011
NOTE: Submission o	f false, error	neous, or incomplete inform					of 2 U.S.C. §437g.
Office Use Only				For further information Federal Election Commis Toll Free 800-424-9530			ORM 1 1 02/2009)

	_		4 (5) 4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (
			rm 1 (Revised 02/2009)	Page 2
5.			OMMITTEE • Committee:	
	(a)	\boxtimes	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. (Complinformation below.)	ete the candidate
	Name Candi		William Laughlin Artz	<u> </u>
	Candi Party	id ate Affiliatio	on IND Sought: House Senate President	State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	ila yang bi ina gasa W
	Name Candi			
	Party	y Con	nmittee:	
	(d)			Democratic, epublican, etc.) Party.
	Polit	ical A	ction Committee (PAC):	
	(e)	П	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 NQT a separate seg committee. (i.e., nonconnected committee)	regated 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.)	
	Joint	Fund	Iraising 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.	o or more political
	(h)	П	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
		ب	committees/organizations, note of which is an authorized committee of a federal candidate.	
		Com	mittees Participating in Joint Fundraiser	ം അവ്യയാട ്ടുന്നുന്നു. പാകുട്ടുകൾക്കും അവ്യ
		1.	FEC ID number C	maleur de la company
		2.	FEC ID number	
		3.	FEC ID number	ransşinindigeninge, evreşi izdeyinder Veresi (heren ilkin və ¹⁴ də desilərdə ilk san a
		4.		CTRANSPORTER STATE OF THE STATE
			Eroce Committee of the	Kale I and amilian Brook to

	TEO TOTAL T (FIET	1360 02/2000/	
	/rite or Type Committee		
L	aughlin for	President	
6.	Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC	Sponsor
			i
L			
L			
	Mailing Address		
		CITY STATE ZIP COL	DE
	Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Representative Leadership I	PAC Sponsor
	` Ц		
7.	Custodian of Records	s: Identify by name, address (phone number optional) and position of the person in possession	of committee
	books and records.		
	La'	verna Ayodele Moore	1
	Full Name	₁ 888 Eighth Avenue, Apt. 14-O	<u> </u>
	Mailing Address	•	
		Now York	
		New York NY 10019 -	
	Title or Position	CITY STATE ZIP COL	DΕ
	Custodian of	Records Telephone number 212 - 977 -	3623
		Telephone number 2 2 - 3 1 1 - - - - - - - -	0424
 8.	Treasurer: List the nar	me 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	ŋyllişˌĘ.ˌDubrow ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ ˌ	1
		60 East 42nd Street, Suite 4600	1
	Mailing Address	1	
		New York	0043
		CITY STATE ZIP COL	
	Title or Position		
	Treasurer	Telephone number [212] - [661] -	2885

	1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	,	
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds exes or maintains funds. Depository, etc.	, noids accounts, rems
safety deposit bo	xes or maintains funds.	LI L
safety deposit bo Name of Bank, D	pepository, etc. JPMorgan Chase Bank 525 Broadway	
safety deposit bo Name of Bank, D	pepository, etc. JPMorgan, Chase Bank 525 Broadway	0012 -
safety deposit bo Name of Bank, D	pepository, etc. JPMorgan Chase Bank 525 Broadway	
safety deposit bo Name of Bank, D	Depository, etc. JPMorgan Chase Bank 525 Broadway New York CITY STATE)012, j-[,,,
safety deposit bo Name of Bank, D Mailing Address	Depository, etc. JPMorgan Chase Bank 525 Broadway NY NY 10 CITY STATE)012, j-[,,,
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Depository, etc. JPMorgan Chase Bank 525 Broadway NY NY 10 CITY STATE)012, j-[,,,
safety deposit bo Name of Bank, D Mailing Address	Depository, etc. JPMorgan Chase Bank 525 Broadway New York CITY STATE)012, j-[,,,
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Depository, etc. JPMorgan Chase Bank 525 Broadway New York CITY STATE)012, j-[,,,
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Depository, etc. JPMorgan Chase Bank 525 Broadway New York CITY STATE)012, j-

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. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt 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 or Postmarked Other (Specify): DATE PREPARED