FEC FORM 1	STATEMEN ORGANIZ	_	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
Jefferson Engag	jed Democracy In	itiative	
ADDRESS (number and street)	18 Landon Way		
(Check if address is changed)	Exton CITY▲		PA 19341 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDF	RESS		
(Check if address is changed)	msunnergren@gmail.co	om	
	Optional Second E-Mail Ado		
COMMITTEE'S WEB PAGE A (Check if address is changed)			
2. DATE 11 /	10 ⁷ Y Y Y Y 2016		
3. FEC IDENTIFICATION I		00628651	
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 Treasu	rer Sunnergren, Michael, , ,		
Signature of Treasurer	mergren, Michael, , ,	[Electronically Filed]	Date 11 / D D / Y Y Y Y Y 2016
NOTE: Submission of false, erro		may subject the person signing t ON SHOULD BE REPORTED W	his Statement to the penalties of 2 U.S.C. §437g. /ITHIN 10 DAYS.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	

Image# 201611109037140103

11/10/2016 15 : 56

	1 (Revised 02/2000)	Page 2
	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE e 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		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Part
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising 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.	wo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Corr	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Jefferson Engaged Democracy Initiative

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

N																																						
	Mailing Address																																					
																																			- [
												CI	TΥ										_		S	ΓΑΤ	Ē					Z	ΊΡ	CC)DE			
	Relationship:	Co	onne	ecteo	d Org	aniz	atio	n	A	\ffil	iate	ed	Со	mn	nitte	ee			Joir	nt F	un	dra	isir	ng F	Rep	ore	sen	tati	ve		Le	ead	lers	ship	PA	.C S	броі	nsor
7.	Custodian of Rebooks and record		ds:	Ider	ntify l	эу n	ame	e, a	ddre	ess	(p	hoi	ne	nu	mb	er		op	tion	ial)	ar	nd	pos	itio	n d	of t	he	pei	rsoi	n ir	і ро)SS(ess	ion	of	cor	nmi	ttee
	Full Name	ິ 	unne	rgre	en, Mi	chae	əl, , ,	,	I	I	I	I	I	I	1	1	1		1	1	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	
	Mailing Address				18	Lan	don	Wa	y																													
	Maining Address																																					
					Ex	ton																			ŀ	PA			1	93	41				 - L			
	Title or Position											СП	ΓY												ST/	ΑTE	-					Z	IP	со	DE			
	Treasurer					<u> </u>													Т	ele	pho	one	nı	ımt	ber		L				- [- [
8.	Treasurer: List the any designated a	he n agen	ame t (e.	ani g., a	d ado assist	dres: tant	s (pl trea	hon	e n er).	um	ibei	r	- op	otic	ona	l) (of t	he	tre	as	ure	er c	of th	ne o	cor	nm	itte	e; a	and	th	e n	am	e a	ind	ad	dre	ss c	f
	Full Name of Treasurer				n, Mi																			1														
	Mailing Address				18	Land	don '	Wa	y																													
					Ex	ton					(- Y											0	L				1	934	11	 Z	IP	_ - co	- _ DE			
L	Title or Position Treasurer		<u> </u>			<u> </u>													Te	eleț	ohc	one	nu	mb	er			_			. [_			_] -	- [_			

l

FEC Form 1 (Revised 02/2009)

Full Name of Designated	Wright, Alexander, , ,
Agent	
Mailing Address	6832 Phillips Mill Rd
	New Hope PA 18930 Image: Ima
	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.

PNC B	ank		
Mailing Address	1823 Wilmington Pike		
	Glenn Mills	PA [19342	
	CITY	STATE ZIP CODE	
Name of Bank, Depository, e	tc.		
Mailing Address			
	CITY	STATE ZIP CODE	