150-3-10-2-010-4

FEC

STATEMENT OF **ORGANIZATION**

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				<u> </u>	Office Use Only.
1. NAME OF		(Check if name Example: If typing, type		1141F Or'141 FI	
COMMITTEE (in	full)	is changed)	over the lines.	12FE4M5	
.1787 Natio	nal C	ommittee, Inc.			
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			11111111		11111111
ADDDECC / F	-d -d	244 Madison	Avenue		
ADDRESS (number an	u street)	Suite 1787		1 1 1 1 1 1	
(Check if ad	dress			A137	40046 0047
is changed)		New York		NY	10016 _{- 2817}
			CITY	STATE	ZIP CODE
			VII I	JIAIE	ZII OODE
COMMITTEE'S E-MAI	L ADDRE	SS (Please provide only one			•
(Check if a	addraee	info@,1787fo	rAmerica.org		
is changed		1		11111	1 1 1 1 1 1 1 1 1 1
COMMITTEE'S WEB	PAGE AD				
		www.1787for	America.org		<u> </u>
(Check if a is changed		1	· · · · · · · · · · · · · · · · · · ·		
lana	ਜ਼ਰੀ <i>।</i> ਨਿਵ				
2. DATE 01	17	2013			
3. FEC IDENTIFIC	ATION N	UMBER C			
4. IS THIS STATEM	MENT X	NEW (N) OR	AMENDED (A)		
- 10 1110 011121		<u> </u>			
I certify that I have e.	xamined th	his Statement and to the bes	st of my knowledge and belief	it is true, correct	and complete.
		Emily Mathe	ws		
Type or Print Name of	f freasure				
		Conttour)		ስት	' 17" ' 2013"
Signature of Treasure	r	· www.come		Date U	
NOTE: Submission of 5	aleo oron	pous or incomplete information	may subject the nerses signific	n this Statement to	the penalties of 2 U.S.C. §437g.
NOTE. Submission of I	aise, errori		TON SHOULD BE REPORTED	-	the penalties of 2 U.S.C. 9437g.
	1		· · · · · · · · · · · · · · · · · · ·		
Office Use			For further information Federal Election Commi		FEC FORM 1
Only			Toll Free 800-424-9530 Local 202-694-1100		(Revised 02/2009)

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F	FEC Fo	rm 1 (Revised 02/2009)	Page 2	
		ОММІТТЕЕ		
Can	didate	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. (Compinformation below.)	ete the candidate	
Name Cand	e of lidate		<u> </u>	
	lidate Affiliati	Office Sought: House Senate President	State	
(c)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District	
(c) Name		This committee supports opposes only one candidate, and is NOT an admonated committee.		
	lidate		!	
Part	ty Con	mittee:		
(d)			Democratic, epublican, etc.) Party. 	
Poli	tical A	ction Committee (PAC):		
(e)		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	
			Cooperative	
		In addition, this committee is a Lobbyist/Registrant PAC.		
(f)	\times	This committee supports/opposes more than one Federal candidate, and is NOT 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.)		
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 nandidate.	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	
	_			
	Com	mittees Participating in Joint Fundraiser		
	1.	FEC ID number		
	2.	FEC ID number		
	3.	FEC ID number		
	4.			

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Write or Type Committee Nar		. 290
	Committee, Inc.	
	Organization, Affiliated Committee, Joint Fundralsing Representative, or Le	adership PAC Sponsor
111111111		
Mailing Address		
Maning Address		
		11
	CITY STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Id books and records. 	lentify by name, address (phone number optional) and position of the person	in possession of committee
Full Name Emily	y Mathews	
Mailing Address	244 Madison Avenue	
	Suite 1787	1 1 1 1 1 1 1 1
	New York NY 1	0016 - 2817
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number [214]	- [727 - [0615
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and to , assistant treasurer).	he name and address of
Full Name Emily	y Mathews	
Mailing Address	244 Madison Avenue	
	Suite 1787	1 1 1 1 1 1 1
	New York New York	0016 1-12817
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 214	_ [727,

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Full Name of Designated Agent				
	1			
Mailing Address		<u> </u>		
	CITY	STATE	ZIP CODE	
Title or Position				
	Telep	phone number	-	
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. Bank of America				
Mailing Address	2077 Broadway			
	New York, , , , , , , , , , , , , , , , , , ,	NY10	023	
	CITY	STATE	ZIP CODE	
Name of Bank, Depository, etc.				
Mailing Address		·		
		يا ليا لي		
	СІТУ	STATE	ZIP CODE	

Federal Election Commission

The FEC added this page to the end of this filing to income	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked ///8//3
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature (Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Bu	usiness 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):	e of Receipt or Postmarked
Loup	1/24/13
PREPARER	DATE PREPARED

(3/2005)