## **FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

PAGE 1/4 =

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2016 JAN 28 AM 11: 23

_						<u></u>	Office Use Only
1	NAME OF COMMITTEE (in full)		(Check if name is changed)		mple: If typing, type the lines.	12FE4	M5
Ę	Elbert Guillory for	Am	erica				,
L							
L	<del></del>		<u> </u>				
Δ	ADDRESS (number and street)	P.O. E	3ox 160				
ኅ	(Check if address	1.				1 1 1	1
Ó	is changed)	Lawte	!	<del>-                                    </del>		ıLA ı	70550
2 0 1 6		Щ	CITY ▲	<u> </u>		LL_ STATE ▲	ZIP CODE ▲
-		20			•		•
0 c	COMMITTEE'S E-MAIL ADDRES		elbertguillory.con	<b>n</b>			
2	☐ (Check if address is changed)			<del></del>	1.		
8		Option	nal Second E-Mail Ad	dress			,
0		osa	terfield@hdafed	; com			
28 - <b>03</b> -							
	COMMITTEE'S WEB PAGE ADDRESS (URL)						
Ö	(Check if address is changed)	www.	elbertguillory.com	1 1 1			1
4	is changed)						
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00042137							
, 2	2. DATE 01 / 20	<u> </u>	2016		•		
3	3. FEC IDENTIFICATION NUMBER ▶ C						
					l		
4	I. IS THIS STATEMENT 🔀		EW (N) OR		AMENDED (A)	_	
ı	certify that I have examined th	is State	ment and to the bes	t of my k	knowledge and belief it	is true, con	rect and complete.
Type or Print Name of Treasurer  Signature of Treasurer  Date  Date							
						21 21 2016	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.							
I	Office Use		T		For further information of Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)
	Only				Local 202-694-1100		· _

FEC	Form 1 (Revised 02/2009)	Page <b>2</b>
	COMMITTEE te Committee:	
(a)		
(b) ·	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Name of Candidate	Elbert Guillory	
Candidate	Office	State LA
Party Affil	ation REP Sought: House Senate President	District 04
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	ommittee:	
(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politica	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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) <b>[</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate s	egregated 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 Fu	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
C	ommittees Participating in Joint Fundraiser	
1.	FEC ID number	**************************************
2.	FEC ID number	
3.		
4.		<u>^</u>
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FEC Form 1 (Rev	sed 02/2009)		Page 3
Write or Type Committee	Name		
Elbert Guillor	y for America		
6. Name of Any Connec	ted Organization, Affiliated Committee, Jo	oint Fundraising Representative, or L	eadership PAC Sponsor
NONE			
	<u>                                     </u>	<u> </u>	
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Conr	ected Organization Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records books and records.</li> </ol>	: Identify by name, address (phone number	optional) and position of the persor	n in possession of committee
•	d Satterfield		
Fuli Name	<del></del>		
Mailing Address	228 S Washington Street		
	Suite 115		
`	Alexandria	VA 2	22314
Title or Position	CITY	STATE	ZIP CODE
Treasurer		. Telephone number 703	
Treasurer: List the name any designated agent (	ne and address (phone number optional) (e.g., assistant treasurer).	of the treasurer of the committee; and	the name and address of
Full Name David	d Satterfield		
Mailing Address	228 S Washington Street		
	Suite 115		
	Alexandria		2314
Title or Position	CITY	STATE	ZIP CODE
Treasurer	·	Telephone number 703	_ 549 - 7705

FEC Form 1 (Revis	sed 02/2009)		Page <b>4</b>
Full Name of Designated Agent	<u> </u>		
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position		ephone number	
<ol> <li>Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository</li> </ol>		the committee deposits fun	ds, holds accounts, rents
BB&1	- 		
Mailing Address	300 S Washington St		
7			
	Alexandria	L VA	22314
	CITY	STATE	ZIP CODE
Name of Bank, Depository	, etc.		
ا ا	<del>                                     </del>		
Mailing Address			
			1
		<del></del>	

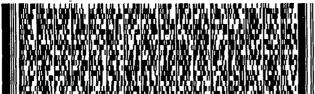
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING I The FEC added this page to the end of this filing to indicate h	•
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USPS Registered/Certified	Postmarked (R/C)
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USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify): Next Business	Shipping Date 1/37/6 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):	ceipt or Postmarked
PREPARER (3/2015)	1/28/16 DATE PREPARED