PAGE 1 / 4 =

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Candidate Committee 24238 Lema Dr ADDRESS (number and street) (Check if address is changed) Santa Clarita 91355 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dglaser@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00611954 FEC IDENTIFICATION NUMBER > 3. X 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. Daniel G Glaser Type or Print Name of Treasurer Daniel G Glaser [Electronically Filed] 03 15 2016 Signature of Treasurer Date 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

FEC Fo	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE e Committee:	
(a) X	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. (Corinformation below.)	mplete the candidate
Name of Candidate	Daniel G Glaser	<u> </u>
Candidate Party Affiliat	ion IND Office Sought: House Senate X President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	nmittee: (National, State	(Domocratic
(d)	This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected 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 s committee. (i.e., nonconnected committee)	segregated 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	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4		

FEC Form 1 (Revise	ed 02/2009)	Page 3
Write or Type Committee Na		<u> </u>
Candidate Co	mmittee	
	d Organization, Affiliated Committee, Joint Fundraising Representative, or Le	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: le books and records.	dentify by name, address (phone number optional) and position of the person	in possession of committee
I	G Glaser	
Full Name	24238 Lema Dr	
Mailing Address		
	Santa Clarita	1355
	Salita Cialita	
Title or Position	CITY STATE	ZIP CODE
	Telephone number]
. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; and j., assistant treasurer).	the name and address of
Full Name Daniel Of Treasurer	G Glaser	
Mailing Address	24238 Lema Dr	
	Santa Clarita CITY STATE	ZIP CODE
Title or Position		5552
	Telephone number]-

FEC For n	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	- Children C	
Mailing Address	East West Bank 15821 Ventura Blvd, #185 Encino CA 91436	
	CITY STATE	ZIP CODE
Name of Bank, I		
Mailing Address		
	CITY STATE	ZIP CODE