Only

STATEMENT OF

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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. Maximus Van Orden 8036 hawkshead rd ADDRESS (number and street) (Check if address is changed) Wake forest 27587 NC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Nickvanorden@me.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2015 C00583948 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. Nicholas Van orden Type or Print Name of Treasurer Nicholas Van orden [Electronically Filed] 80 20 2015 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

Local 202-694-1100

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TYPE OF COMMITTEE	
Candidate Committee: (a) X This committee is a principal campaign committee. (Complete the candidate information)	halaw
(a) X This committee is a principal campaign committee. (Complete the candidate information	pelow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee information below.)	e. (Complete the candidate
Name of Candidate Maximus Van Orden	<u> </u>
Candidate Office Party Affiliation IND Sought: House Senate X President	State
Party Affiliation Sought: House Senate X President	District
(c) This committee supports/opposes only one candidate, and is NOT an authorized commit	ttee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.)	Its connected 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 sepa committee. (i.e., nonconnected committee)	arate 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 Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceed	de for two or more political
committees/organizations, at least one of which is an authorized committee of a federal cand	
(h) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.	ls for two or more political
Committees Participating in Joint Fundraiser	
1. FEC ID number	
2.	
3.	
4.	

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Write or Type Committee		V · ·
Maximus Va	n Orden	
	cted Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Representative	e Leadership PAC Sponsor
Custodian of Records books and records.	s: Identify by name, address (phone number optional) and position of the personal	on in possession of committee
I	nolas Van orden	
Full Name	,8036 hawkshead dr	
Mailing Address		
	Webs forest	27587
	Wake forest NC	
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
. Treasurer: List the nan any designated agent (me and address (phone number optional) of the treasurer of the committee; an (e.g., assistant treasurer).	nd the name and address of
Full Name Nich of Treasurer	olas Van orden	
Mailing Address	8036 hawkshead dr	
	Wake forest CITY STATE	27587 ZIP CODE
Title or Position		1002
	Telephone number	

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Full Name of Designated	Nicholas Van Orden	, , , , , , I		
Agent	8036 hawkshead dr			
Mailing Address	OUSO Hawksheau UI			
	Wake forest CITY STATE Z	IP CODE		
Title or Position				
		33 - 0923		
Mailing Address	Wells fargo Strickland rd, raleigh nc 27613 Raleigh NC 27613			
	CITY STATE Z	IP CODE		
Name of Bank, Depository, etc.				
Mailing Address				
	CITY STATE Z	IP CODE		