FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instruc	Office use only												
NAME OF COMMITTEE (in a	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5											
HOOK POLITIC	CAL ACTION COMMITTEE	1 1 1 1 1 1 1 1 1 1 1												
		1 1 1 1 1 1 1 1 1 1 1												
ADDRESS (number and s	PO BOX 33793													
(Check if address is changed)	washington		DC 20033 _											
		CITY	STATE▲ ZIP CODE ▲											
COMMITTEE'S E-MAI														
1														
COMMITTEE'S WEB	PAGE ADDRESS (URL)													
2. DATE 0 20 20 20 20 20 20 20 20 20 20 20 20 2														
3. FEC IDENTIFICA	TION NUMBER	C C00393504	1											
4. IS THIS STATEM	ENT X NEW (N) OF	AMENDED (A)												
I certify that I have exami	ned this Statement and to the best of my	knowledge and belief it is true, correct a	nd complete											
Type or Print Name of	Treasurer Jeffrey Pike													
Signature of Treasurer	Electronically Filed by Jeffrey	Pike	Date 02 / 01 / YYYYY											
NOTE: Submission of fal	•	may subject the person signing this State	tement to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS											
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530												

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5.	. TYPE OF COMMITTEE (Check One)	
	(a) This committee is a principal campaign committee. (Complete the candidate information) This committee is an authorized committee, and is NOT a principal campaign committee information below.)	
	Name of Candidate	
	Candidate Office Party Affiliation Sought: House Senate	State President District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized comm	mittee.
	Name of Candidate	
	(d) This committee is a (National, State (or subordinate) committee of the (e) This committee is a separate segregated fund (f) X This committee supports/opposes more than one Federal candidate, and is NOT a segregated fund (National, State (or subordinate) committee is a separate segregated fund (National, State (or subordinate) committee of the (or subordinate) committee is a separate segregated fund (National, State (or subordinate) committee of the (or subordinate) committee (or subordinate) committee of the (or subordinate) committee (or s	(Democratic, Republican,etc.) Party.
6.	Name of Any Connected Organization or Affiliated Committee	
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L		
	Mailing Address	
	CITY ≜ STA	ATE ▲ ZIP CODE ▲
	Relationship	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative

Write or Type Committee Name

HOOK POLITICAL ACTIO	N COMMITTEE	Ξ
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	HOOK POLITICAL ACTION	ON COMMITTEE		
7.	Custodian of Records: Idea possession of Committee b	ntify by name, address, (phone number cooks and records.	optional), and position of the	e person in
	Full Name			
	Mailing Address			
	Title or Position ♥	CITY A	STATE▲	ZIP CODE A
			Telephone number	
3.	Treasurer: List the name a	and address (phone number optional) of designated agent (e.g., assistant treasurer	the treasurer of the commit	tee; and the
	Full Name of Treasurer			
	Mailing Address			
	Title or Position ♥	CITY A		
			Telephone number	
	Full Name of Designated Agent			
	Mailing Address			
	Title or Position ♥	CITY A	STATE A	ZIP CODE A
			Telephone number	

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9.	Banks or Other I							l ba	nks	s or	oth	ner	de	pos	sito	ries	in	wh	iich	the	e co	omr	nitt	ee d	dep	osi	ts f	unc	ls,	holo	ds	acc	our	ıts,	rer	nts			
	Name of Bank, Do	eposi	tory,	etc.																																			
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	Mailing Address					ı							1						1		1	1		1		1					ı		1		1	1	1	1	, 1
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