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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. Casey Gray for Congress 2016 1626 N Wilcox 108 ADDRESS (number and street) (Check if address is changed) Hollywood 90028 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS casey.grey@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00579482 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. Casey Logsdon Gray Type or Print Name of Treasurer Casey Logsdon Gray [Electronically Filed] 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 Only

Local 202-694-1100

F	EC Fo	orm 1 (Revised 02/2009)	Page 2				
		COMMITTEE e Committee:					
(a)	\times	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. (Complete the information below.)	e candidate				
Name Candi		Casey Logsdon Gray					
Candi Party	idate Affiliati	ion REP Office Sought: X House Senate President Dist	28				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Candi							
Part	y Con	nmittee: (National, State	ratio				
(d)		· · · ·	anc, an, etc.) Party.				
Polit	ical A	Action Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected or	organization is a				
		Corporation Corporation w/o Capital Stock Labor	Organization				
		Membership Organization Trade Association Coope	rative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated 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	Fund	draising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mocommittees/organizations, at least one of which is an authorized committee of a federal candidate.	re political				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	re political				
	Com	nmittees Participating in Joint Fundraiser					
	1.	FEC ID number C					
	2.	FEC ID number					
	3.	FEC ID number C					
	4						

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Write or Type Committee N	Name	
Casey Gray f	for Congress 2016	
6. Name of Any Connect	ted Organization, Affiliated Committee, Joint Fundraising Representative, or Lo	eadership PAC Sponsor
NONE		
	<u> </u>	
Mailing Address		
Mailing Address		
		. 1_1 1
	CITY STATE	ZIP CODE
5 t ii		DAC Spannage
Relationship: Conne	nected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Pocords	: Identify by name, address (phone number optional) and position of the person	a in passassian of committee
books and records.	Huentily by hame, address (phone humber optional) and position of the person	III possession or committee
	ey Logsdon Gray	
Full Name	1626 N Wilcox 108	
Mailing Address		
	Hollywood , CA , 19	0028
	Tionywood	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	_ 508 7391
B. Treasurer: List the name any designated agent (e	ne and address (phone number optional) of the treasurer of the committee; and e.g., assistant treasurer).	the name and address of
Full Name Casey of Treasurer	y Logsdon Gray	
Mailing Address	1626 N Wilcox 108	
	Hollywood CA 90	0028
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 619	_ 508 7391

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Full Name of Designated Agent	 			
Mailing Address				
		CITY	STATE	ZIP CODE
Title or Position		Telephoi	ne number]-[
				halds accounts must
Banks or Other safety deposit b	Depositories: List all banks or ot xes or maintains funds.	ther depositories in which the c	ommittee deposits funds	s, noids accounts, rents
Banks or Other safety deposit b Name of Bank,	xes or maintains funds.	ther depositories in which the c	ommittee deposits funds	s, noids accounts, rents
safety deposit b	xes or maintains funds.	ther depositories in which the c	ommittee deposits funds	s, noids accounts, rents
safety deposit b	xes or maintains funds. Depository, etc.		ommittee deposits funds	s, noids accounts, rents
safety deposit b Name of Bank,	xes or maintains funds. Depository, etc. Citibank 10460 MT Gleason A			
safety deposit b Name of Bank,	xes or maintains funds. Depository, etc. Citibank			1042
safety deposit b Name of Bank,	xes or maintains funds. Depository, etc. Citibank 10460 MT Gleason A			
safety deposit b Name of Bank,	xes or maintains funds. Depository, etc. Citibank 10460 MT Gleason A Tujunga	VE	CA 9	1042
safety deposit b Name of Bank, Mailing Address	xes or maintains funds. Depository, etc. Citibank 10460 MT Gleason A Tujunga	VE	CA 9	1042
safety deposit b Name of Bank, Mailing Address	cepository, etc. Citibank 10460 MT Gleason A Tujunga Depository, etc.	VE	CA 9	1042
safety deposit b Name of Bank, Mailing Address Name of Bank,	cepository, etc. Citibank 10460 MT Gleason A Tujunga Depository, etc.	VE	CA 9	1042