## 29050102190

FEC FORM 1

## STATEMENT OF ORGANIZATION

FEC MAIL CENTER

Office Use Only

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5			
TIRIOLY ID ISTIAN	ULEY FOR C	CONGRESS CO	MMITTE	ie		
1						
ADDRESS (number and street)	112436 HIL	CIKIOIRIYI IFIDIRIEIS	ST RD	لتستينيي		
(Check if address is changed)	<u> </u>	<u>-                                    </u>				
io ditangouy	DAICKSONVA	FLLE		32224-		
		CITY	STATE	ZIP CODE		
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one	e-mall address)				
(Charle 16 address	TROY SHAN	n.l.e.y. @.MAC.	COM			
(Check if address is changed)	<u> </u>	<u>,                                     </u>	11111			
COMMITTEE'S WEB PAGE ADD	_	15115 0511				
(Check if address	WWW. STAINI	LEY 10. GOM 1.				
is changed)						
2. DATE 0 6 6	2009					
3. FEC IDENTIFICATION N	IMBER C					
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)						
I certify that I have examined th	is Statement and to the bea	st of my knowledge and belief	it is true, correct a	nd complete.		
Time or Brief Name of Transure	Rosa Va	lensia Tun	000			
Type or Print Name of Treasure	)10		F			
Signature of Treasurer	Valencia	tupper	Date 0 6	111 12009		
NOTE: Submission of false, errone	•	n may subject the person signing		ne penalties of 2 U.S.C. §437g.		
Office Use		For further Information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)		

rage 2	
TYPE OF COMMITTEE Candidate Committee:	
(a) 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 candidate information below.)	
Name of Candidate TROY Do STANLEY	۷
Candidate REP Office Sought: X House Senate President District 04	
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	لـ
Party Committee:	
(National, State (Democratic, d) This committee is a or subordinate) committee of the Republican, etc.) Party	y.
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 Lobbylst/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)	y
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 proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.	
Committees Participating in Joint Fundraiser	
1. FEC ID number C	
2. [	
3. FEC ID number C	:
4. FEC ID number C	•

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Write or Type Committee Name			
6. Name of Any Connected (	organization, Affiliated Committee, J	oint Fundraising Representati	ive, or Leadership PAC Sponsor
Mailing Address			
•			
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee	Joint Fundraising Represe	entative . Leadership PAC Sponsor
books and records.	ntify by name, address (phone number	_	
Full Name 91000	A. Valencia TUI		
Mailing Address	1.4.10.7 DENTION	KP	
	IJACKSON WILLE	اتا لىسىسا	1 1322261-1
Title or Position	CITY	STATE	ZIP CODE
TREASURER		Telephone number	<u>9,0,41</u> -1 <u>3,0,21-10,59,3</u>
8. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) assistant treasurer).	of the treasurer of the committ	tee; and the name and address of
Full Name of Treasurer	A VALENCIA	TUPPER	
Malling Address	OLINACI LOI PHI	N RD	
	~10.62111F11		20006

ZIP CODE CITY Title or Position
TREASURER Telephone number 19,0,41-13021-105,93

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Full Name of Designated Agent	ERITE STANGEY					
Mailing Address	12436, HICKORY, FORES	TRD				
	CITY	STATE	ZIP CODE			
Title or Position	EASURER Telephone i	number 90	)41-B091-P0A81			
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.						
ial Asc	Y FEDERAL CREDIT UN	TAU				
		IIOM I I	<u> </u>			
Mailing Address	(4,0,130x, 3000)					
	MERRIFIELD	11/ A .	120 1 191 1202 21			
•	MERRICA	[ <b>V</b> .Æ]	2211191-13000			
	CITY	STATE	ZIP CODE			
Name of Bank, Depository,	etc.					
ــــــا						
Mailing Address						
		لبنا	لسنا-لسنا			
	CITY	STATE	ZIP CODE			

(3/2005)

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered **Postmarked USPS First Class Mail USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify):** -Next Business Day Delivery **Date of Receipt** 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 or Postmarked Other (Specify): **PREPARER** DATE PREPARED