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FEC FORM 1

STATEMENT OF **ORGANIZATION**

RECEIVED

~~ 2011 NOV-10 AM 11: 00'

E.R

				Office USF 60 MAIL CEN
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	1ŽFĚ4M5	
Dieicikieis Fioi	ri Congress			
ADDRESS (number and stree	1 PO BOX 3	2		
(Check if address is changed)	Mambin	11111111111	1/1/2/	1.4.4.6.41-
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADD	ORESS (Please provide only one	e-mail address)		
(Check if addres	s limfo@and	riewidieicikierizi	0112000	m_{\parallel}
is changed)			1111	
COMMITTEE'S WEB PAGE	ADDRESS (URL)			
(Object if address	WWW. laindir	ewdieiciKieiri2a	1,2,,Com	
(Check if address is changed)	· 		11111	
2. DATE	04			
3. FEC IDENTIFICATION	N NUMBER	0,0,5,0,3,7,9,7		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examine	ed this Statement and to the be	est of my-Kniowledge-and belief	it is true, correct	and complete.
Type or Print Name of Treat	surer Andrew Deck	er		
Signature of Treasurer	J. Call	The	Date	04/2011
NOTE: Submission of false, e	•	on may subject the person signing	-	the penalties of 2 U.S.C. §437g.
Office Use		For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Bevised 02/2009)

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		OMMITTEE
Ca	ndidate	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.)
	ne of ididate	Andrew Decker
	ididate ty Affiliati	on Rep Office Sought: House Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	ne of Ididate	
Pa	rty Con	nmittee:
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
Pol	litical A	ction Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
	فسنا	Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		lu addition, this committee is a Lobbyist/Registraot 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.)
Joi	nt Fund	Iraising 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 furioral cardidate.
(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.
	Com	mittees Participating in Joint Fundraisor
	1.	
	2.	FEC ID number
	3.	
	4.	
	т.	

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Write or Type Committee Name	B	
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
Mailing Address		
		1-1 1
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative Le	eadership PAC Sponsor
7. Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person in po	ssession of committee
Full Name Ainidi	rew Decker	
Mailing Address	17.11.14 Twicker Lane	
	Hamilian NY 144	<u> </u>
Title or Position	CITY STATE	ZIP CODE
Tirieiaiskirieiri	Telephone number 3115-6	5.19.41-16.17.8121
8. Treasurer: List the name an any designated agent (e.g.,	ad address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	arne and address of
Full Name of Treasurer Ain Idi	riew Dieickieir	
Mailing Address	17.1.1.4 Twicker Lane	
		<u>.</u>
	CITY STATE	164 – L
Title or Position [T_1 e a S \alpha F e T		[19,4]-[6,17,8,2]

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	-
 Banks or Other 	er Depositories: List all banks or other depositories in which the committee deposits funds,	
• •	Depository, etc.	
Name of Bank,	Depository, etc. SiPiMairigiain: Cihiaisie: Biainik	
• •	Depository, etc. SiPiMoirigiain Cihiaisie Biainik	
Name of Bank,	Depository, etc. Sipinarigiain Cihiaisie Biainik	
Name of Bank,	Depository, etc. Sipimairigiain Cihiaisie Biainik	
Name of Bank,	Depository, etc. Sipinarigiain Cihiaisie Biainik	
Name of Bank, Mailing Address	Depository, etc. J.P.Mairigiain Cihiaisia Biaink Strice Biaink Birioicikipioiriti Diyl Lii	4.4.2.0 -
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Name of Bank, Mailing Address	Depository, etc. Sipinarigiain Chaise Baink	4.4.2.0 -
Name of Bank, Mailing Address	Depository, etc. Sipinarigiain Chiaise Braink	4.4.2.0 -
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Sipinarigiain Chiaise Braink	4.4.2.0 - L
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Sipinarigiain Chiaise Braink	4.4.2.0 - L

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** 11/4/11 Postmarked (R/C) **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): 11/10/11 DATE PREPARED