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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. Liberty for Us Super PAC 4501 Ford Ave Suite 713 ADDRESS (number and street) (Check if address is changed) Alexandria 22302 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS longkaleigh@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00676429 FEC IDENTIFICATION NUMBER > 3. 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. Johnson, Brad, , , Type or Print Name of Treasurer Johnson, Brad, , , [Electronically Filed] 04 16 2018 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

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected 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.	
(5)			areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee N		
Liberty for Us	Super PAC	
6. Name of Any Connector	ed Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
<u> </u>		<u> </u>
Mailing Address		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	e Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the pers	on in possession of committee
Long, Full Name	Martha, , ,	
Mailing Address	4501 Ford Ave	
g /.u	Apt 713	
	Alexandria	22302
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	1 Telephone number	3 948 - 4026
Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; ar .g., assistant treasurer).	nd the name and address of
Full Name Johnson of Treasurer	on, Brad, , ,	
Mailing Address	4501 Ford Ave	
	apt 713	
	Alexandria	22302
Title or Position Treasurer	CITY STATE 703	ZIP CODE
	Telephone number	

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Name of Bank, I	Depository, etc. Access National Bank	1 1 1 1 1 1 1
	Depository, etc.	
Name of Bank, I	Depository, etc. Access National Bank 2050-B, 6847, Ballenger Ave	
Name of Bank, I	Depository, etc. Access National Bank 2050-B, 6847, Ballenger Ave	ZIP CODE
Name of Bank, I	Depository, etc. Access National Bank 2050-B, 6847, Ballenger Ave Alexandria VA 22314 CITY STATE	ZIP CODE
Name of Bank, I	Depository, etc. Access National Bank 2050-B, 6847, Ballenger Ave Alexandria CITY STATE Depository, etc.	ZIP CODE
Name of Bank, I	Depository, etc. Access National Bank 2050-B, 6847, Ballenger Ave Alexandria VA 22314 CITY STATE	ZIP CODE
Name of Bank, I	Depository, etc. Access National Bank 2050-B, 6847, Ballenger Ave Alexandria CITY STATE Depository, etc.	ZIP CODE
Name of Bank, I	Depository, etc. Access National Bank 2050-B, 6847, Ballenger Ave Alexandria CITY STATE Depository, etc.	ZIP CODE
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