

FEC
FORM 1

STATEMENT OF ORGANIZATION

SECRETARY THE SENATE
15 JAN 20 PM 2:01

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Dr. Monica Wehby for U.S. Senate

ADDRESS (number and street)

PO Box 3375

(Check if address
is changed)

Portland

OR

97208

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

bryan@politicalfinancesolutions.com

(Check if address
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.monicafororegon.com

(Check if address
is changed)

2. DATE

01

08

2015

3. FEC IDENTIFICATION NUMBER

C C00550996

4. 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.

Type or Print Name of Treasurer Bryan Burch

Signature of Treasurer

Date

01

08

2015

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
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

15020033216

5. 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 Monica Wehby

Candidate Party Affiliation REP DEM IND OTH

Office Sought: House Senate President

State AL AK AR AZ CA CO CT DC DE FL GA HI IA IL IN KS KY LA MA MD ME MI MN MO MS MT NC ND NH NJ NM NV NY OH OK OR PA RI SC SD TN TX UT VT WA WI WY

District 1 2 3 4 5 6 7 8 9 10 11 12

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a National State or subordinate committee of the Democratic Republican, etc.) Party.

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 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 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. _____ FEC ID number C _____

3. _____ FEC ID number C _____

4. _____ FEC ID number C _____

15020033217

Write or Type Committee Name

Dr. Monica Wehby for U.S. Senate

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Floridians For Senate Majority

Mailing Address

228 S. Washington Street, Suite 115

Alexandria VA 22314

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Bryan Burch

Mailing Address

1022 G Street

Sacramento CA 95814

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number 916-476-6926

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Bryan Burch

Mailing Address

1022 G Street, Suite B

Sacramento CA 95814

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 916-476-6926

15020033218

Write or Type Committee Name

Dr. Monica Wehby for U.S. Senate

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

Founders Senate Candidate Committee

Mailing Address

228 S. Washington St., Suite 115

Alexandria VA 22314

CITY STATE ZIP CODE

Relationship:

- Connected Organization, Affiliated Committee, Leadership PAC Sponsor, [X] Joint Fundraising Representative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

CITY STATE ZIP CODE

Title or Position

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Mailing Address

CITY STATE ZIP CODE

Title or Position

Telephone number

15020033219

Write or Type Committee Name

Dr. Monica Wehby for U.S. Senate

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

Six In 14 Fund

Mailing Address

228 S. Washington Street, Suite 115

Alexandria

VA

22314

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

15020033220

Write or Type Committee Name

Dr. Monica Wehby for U.S. Senate

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

Winning Women For The Us Senate

Mailing Address

228 S. Washington Street, Suite 115

Alexandria VA 22314

CITY STATE ZIP CODE

Relationship:

- Connected Organization, Affiliated Committee, Leadership PAC Sponsor, [X] Joint Fundraising Representative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

CITY STATE ZIP CODE

Title or Position

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Mailing Address

CITY STATE ZIP CODE

Title or Position

Telephone number

15020033221

Write or Type Committee Name

Dr. Monica Wehby for U.S. Senate

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

Friends of Winning Women

Mailing Address

218 S. Washington Street, Suite 115

Alexandria

VA

22314

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

15020033222

Full Name of Designated Agent

None

Mailing Address

Grid for mailing address with fields for CITY, STATE, and ZIP CODE.

Title or Position

Telephone number

9. 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.

BB&T

Mailing Address

1909 K Street NW

Washington

DC

20006

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

US Bank

Mailing Address

410 SW Harrison St.

Portland

OR

97201

CITY

STATE

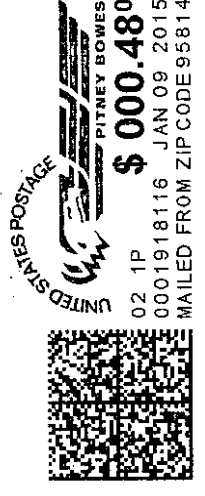
ZIP CODE

15020033223

15020033224

Monica Wehby for US Senate
2 G Street
Berkeley, CA 94704

MONICA WEHBY
CA 94704
10 JAN 15
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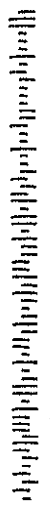


Secretary of the Senate
Office of Public Records

JAN 16 2014

Secretary of the Senate
Office of Public Records
232 Hart Senate Office Building
Washington, DC 20510-7116

205107116



NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7118
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

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1-9-15

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Postmark

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USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

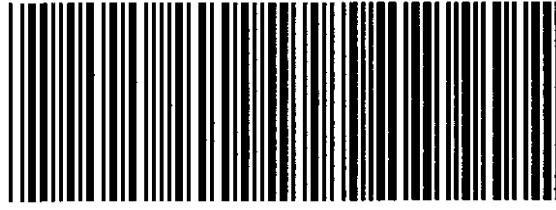
PREPARER

DH

DATE PREPARED

1-20-15

15020033225



SEN PATCH



SEN PATCH

15020033226