FEC

Only

STATEMENT OF

PAGE 1 / 4

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Briggs Campaign 60260 Hatley Detroit Road ADDRESS (number and street) (Check if address is changed) Amory 38821 MS CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS brianbriggsforpresident@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.votebrianbriggsforpresident.com (Check if address is changed) DATE 09 2015 C00583047 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. Frederica Briggs Type or Print Name of Treasurer Frederica Briggs [Electronically Filed] 80 09 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

Local 202-694-1100

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	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE e Committee:	
(a) X	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. (Corinformation below.)	mplete the candidate
Name of Candidate	Brian Briggs	
Candidate Party Affiliat	ion IND Office Sought: House Senate X President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		(Domocratic
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	egregated fund or party
	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 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised	d 02/2009)	Page 3
Write or Type Committee Nar		<u> </u>
Briggs Campa	ign	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Id books and records.	lentify by name, address (phone number optional) and position of the person in	possession of committee
	ea Briggs	
Full Name	60260 Hatley Detroit Road	
Mailing Address		
	Amory MS 3882	1
Title or Position	CITY STATE	ZIP CODE
Treasurer		646 - 1477
3. Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and the , assistant treasurer).	name and address of
Full Name Frederica of Treasurer	a Briggs	
Mailing Address	60260 Hatley Detroit Road	
	Amory MS 3882°	ZIP CODE
Title or Position Treasurer		646 - 1477

	m 1 (Revised 02/2009)	Page 4
Full Name of Designated	Ruth Fortick	- -, , , , , 1
Agent	COODA's Mill Orsel - Deart	
Mailing Address	60024a Mill Creek Road	
	Greenwood Springs MS 38848	
		ZIP CODE
Title or Position Assistant Treas		8804
Banks or Other safety deposit b Name of Bank,	Pr Depositories: List all banks or other depositories in which the committee deposits funds, holds boxes or maintains funds. Depository, etc.	accounts, rents
	Renasant Bank	
Mailing Address	1Hwy 278	
	1Hwy 278	
	1Hwy 278	
	Amory MS 38821	ZIP CODE
	Amory MS 38821 CITY STATE 2	ZIP CODE
Mailing Address	Amory MS 38821 CITY STATE 2	ZIP CODE
Mailing Address Name of Bank,	Amory MS 38821 CITY STATE 2	ZIP CODE
Mailing Address	Amory MS 38821 CITY STATE 2	ZIP CODE
Mailing Address Name of Bank,	Amory MS 38821 CITY STATE 2	ZIP CODE