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## STATEMENT OF

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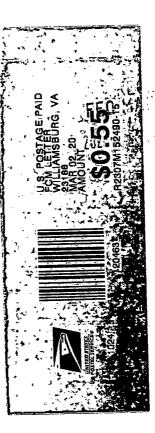
FORM 1	ORGANIZ	ATION	20/2011 AR 16			
1. NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typin over the lines.	g, type 12FE4M	15		
MINGEAR	FOR CONGRESS	3, , , , , , ,				
ADDRESS (number an	nd street) PO BOX 5	PO BOX 533,075				
☐ ◀ (Check if a is changed	ddress ( )					
· ·	CITY A	0415	STATE ▲	ZIP CODE A		
COMMITTEE'S E-MA	IL ADDRESS					
☐ ◀ (Check if a is changed	ddress jdeminie	35 f. 95, 69,1	49,595,0	9 <u>M</u>		
	Optional Second E-Mail A			1		
COMMITTEE'S WEB  (Check if a is changed	PAGE ADDRESS (URL)  ddress  UWWW, Min (	earforce		<u> </u>		
2. DATE 63 62 2520						
3. FEC IDENTIFIC	CATION NUMBER					
4. IS THIS STATEM	NEW (N) OR	AMENI	DED (A)			
I certify that I have e	xamined this Statement and to the bes	st of my knowledge a	nd belief it is true, corre	ect and complete.		
Type or Print Name of	of Treasurer	MIEAR	•			
Signature of Treasure	30 Mine	Eary	Date C	3 62 200		
NOTE: Submission of f	false, erroneous, or incomplete information ANY CHANGE IN INFORMA					
Office Use Only				FEC FORM 1 (Revised 06/2012)		

FEC	rage Z					
	COMMITTEE					
Candida	Candidate Committee:					
(a) <b>2</b>	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	DMUNICAR					
Candidate Party Affil						
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
Party C	ommittee:					
(d)	This committee is a (National, State (Democratic, Republican, etc.) Party.					
Politica	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.					
С	ommittees Participating in Joint Fundraiser					
1.	FEC ID number					
2.	FEC ID number					
3.	FEC ID number					
4.	FEC ID number					

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	
MINIEAR FOR CONGR	RESS
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising	Representative, or Leadership PAC Sponsor
1	
Mailing Address	
СІТУ	STATE ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundra	aising Representative Leadership PAC Spons
<ol> <li>Custodian of Records: Identify by name, address (phone number – optional) and phooks and records.</li> </ol>	position of the person in possession of committee
Full Name ID M. V. (EAR.)	<u> </u>
Mailing Address PO BOX 533075	
INDIANAPOLIS	16253-
Title or Position CITY	STATE ZIP CODE
CA VDID ATE	e number 3(7)-448-708
<ol> <li>Treasurer: List the name and address (phone number optional) of the treasurer of any designated agent (e.g., assistant treasurer).</li> </ol>	of the committee; and the name and address of
Full Name of Treasurer	
Mailing Address  Mailing Address	
[4PD1, AMAROC(S)	1.4 4.6253-
Title or Position  [APADDATE   Telephone	STATE ZIP CODE
1	<del>-</del>

120.0	rm 1 (Revised	02/2009)					Page 4	
						•	-	•
Full Name of Designated Agent						<u> </u>		1
Mailing Address	s		<u> </u>		<u> </u>	1 1 1 1		
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•					لـــا			
			CITY		STATE	Z	IP CODE	
Title or Position	1	<u> </u>		Telephone n	number <u>ı</u>			
Banks or Othe	er Depositorie	s: List all banks of	or other depositories in	which the comm	nittee deposits	funds, holds	accounts, rents	
Name of Bank		э.	_					
	, Depository, et		AVK		1 1 1 1			
	Depository, et	e. 0 45 B	ANK					
Name of Bank	Depository, et	o. 0 45 B						
Name of Bank	Depository, et	o. 0 45 B			111			
Name of Bank	Depository, et	:   8 45 3   87,38 ]			1 XV STATE	1400 2	ZIP CODE .	1
Name of Bank	, Depository, et	:   8   15   13   87   58   1   FT   5   KG	4967H 5		1XV) STATE	1400 2	ZIP CODE	1
Name of Bank Mailing Addres	, Depository, et	:   8   15   13   87   58   1   FT   5   KG	4967H 5		J/V STATE	1400, 2	ZIP CODE	
Name of Bank  Mailing Addres  Name of Bank	Depository, et	:   8   15   13   87   58   1   FT   5   KG	4967H 5		STATE	1460. 2	ZIP CODE .	
Name of Bank Mailing Addres	Depository, et	:   8   15   13   87   58   1   FT   5   KG	4967H 5		STATE	1460 2	ZIP CODE	
Name of Bank  Mailing Addres  Name of Bank	Depository, et	:   8   15   13   87   58   1   FT   5   KG	4967H 5		STATE		ZIP CODE	

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1050 FIRST STREET,

WASHINGTON, DC

MINICAR FOR GNORESS PO BOX 533015 (ADLANAFOUS, 1/1 46253

Federal Election Commission  ENVELOPE REPLACEMENT PAGE FOR INCOM  The FEC added this page to the end of this filing to indice	
Hand Delivered	Date of Receipt
Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Bus	siness Day Delivery
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
Other (Specify):	of Receipt or Postmarked
PREPARER (3/2015)	06 -22 DATE PREPARED