## RECEIVED FEC MAIL CENTER

2016 MAY 16 AH 8: 14

RQ-1

May 3, 2016

GREGORY MARK GUILLAUME, TREASURER CAMPAIGN COMMITTEE FOR GUILLAUME 594 NORTH TURNBERRY DRIVE ORANGE, CA 92869

FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

Response Due Date 06/07/2016

**IDENTIFICATION NUMBER: C00615716** 

REFERENCE: STATEMENT OF ORGANIZATION

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the Statement of Organization referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. An adequate response must be received by the response date noted above. Additional information is needed for the following 1 item(s):

- Your committee failed to designate a campaign depository on Line 9. Please be advised that each registered political committee must designate a campaign depository or depositories. The committee must maintain at least one checking account or transaction account at one of the depositories. Please amend your Statement of Organization (FEC Form 1) to disclose the committee's depository. (11 CFR § 102.2(a)(1)(vi) and 11 CFR §103.2)

Please note you will not receive an additional notice from the Commission on this matter. Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. Requests for extensions of time in which to respond will not be considered. Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

A copy of FEC FORM 1 can be downloaded from the FEC website at <a href="http://www.fec.gov">http://www.fec.gov</a>, or requested through the FEC Faxline at (202) 501-3413. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1171.

For help completing Form 1, please double-click the

icon next to each line number.

FEC

Only

## STATEMENT OF **ORGANIZATION**

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Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. ampaign committee for Guillaume Turnberry Drive ADDRESS (number and street) (Check if address is changed) CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) gmgmain@dslextreme.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE (none - waiting For ID

VIA this Form) C **FEC IDENTIFICATION NUMBER** 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. **Gregory Mark Guillaume** Type or Print Name of Treasurer Signature of Treasure 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 Toll Free 800-424-9530 (Revised 02/2009)

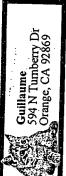
Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)						Page 2
	TYPE OF C	TYPE OF COMMITTEE						
Candidate Committee:								
	(a) X	This committee is a prin	cipal campaign c	committee. (Co	mplete the candid	late inforn	nation below	.)
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name of Candidate Gregory Mark Guillaume						<u> </u>	<u> </u>	
		write in						
	Candidate Party Affiliation	on <b>wri</b>	Office Sought:	House	Senate	×	President	State  District
	(c)	This committee supports	opposes only or	ne candidate, a	and is NOT an au	thorized o	committee.	
	Name of Candidate							
	Party Com	nmittee: NA		•	•			
	(d)	This committee is a		(National, State or subordinate)	e committee of the	9		(Democratic, Republican, etc.) Party.
	Political A	ction Committee (PA	C): NA					•
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization							nnected organization is a	
		Corporation		Corp	oration w/o Capita	al Stock		Labor Organization
		Membership Org	janization	Trad	e Association			Cooperative
		In additio	n, this committee	is a Lobbyist/R	legistrant PAC.			
(f) This committee supports/opposes more than one Federal candidate, and is NO committee. (i.e., nonconnected committee)				is NOT	a separate s	egregated fund or party		
In addition, this committee is a Lobbyist/Registrant PAC.								
		In addition, this co	ommittee is a Lea	dership PAC. (	Identify sponsor or	n line 6.)		
	Joint Fund	raising Representati	ve: NA					
	(g)	This committee collects committees/organizations	ontributions, pays , at least one of w	fundraising ex hich is an auth	penses and disbur	rses net p of a feder	roceeds for to al candidate.	wo or more political
	(h)	This committee collects committees/organizations	ontributions, pays none of which is	fundralsing ex an authorized	penses and disbur committee of a fed	ses net pi deral cand	oceeds for twidate.	vo or more political
	Comi	mittees Participating in	Joint Fundraise	er e				
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	4.		11111		FEC I	D numbei	C	

FEC <b>Form</b> 1 (R	evised 02/2009)				Page 3
Write or Type Committe					· · · · · · · · · · · · · · · · · · ·
Campaign c	ommittee for G	Suillaume			
	ected Organization, Affilia		Fundraising Repr	esentative, or	Leadership PAC Sponsor
<b>76</b>					
Mailing Address					
•					<u> </u>
		CITY		STATE	ZIP CODE
Relationship: Co	onnected Organization	Affiliated Committee	Joint Fundraising	Representative	Leadership PAC Sponso
	TO THE REAL PROPERTY OF THE PERTY OF THE PER	_			
books and records.			optional) and positi	on of the perso	on in possession of committee
Full Name	regory Mark Gu			الاللاللا	
Malling Address	594 North	Turnberry Driv	/ <b>e</b>		
			بليلين فياليا للباليا		
	Orange	<u>L. J </u>		CA	92869
Title or Position		CITY		STATE	ZIP CODE
1				her [714]	_  <b>366</b>     <b>_ 6461</b>
اسلسل مارسل مارسل	<u> </u>	<u> </u>	Telephone num	ber (***	1- [575]
3. Treasurer: List the na any designated agent	ame and address (phone ni (e.g., assistant treasurer).	umber optional) of t	ne treasurer of the	committee; and	I the name and address of
Full Name of Treasurer	regory Mark Gu	ıillaume		1111	<u></u>
Mailing Address	594 North	Turnberry Driv	<b>e</b>		<u> </u>
		<u> </u>		<u> </u>	
	Orange			CA	92869
Title or Position		CITY	;	STATE	ZIP CODE
	111111		Telephone numi	ner  714	366,   6461 ,

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Full Name of Designated NC	ONE LILLIA LA	<u> </u>	
Mailing Address		<u></u>	!_
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	CITY	STATE	ZIP CODE
Title or Position	Telephone n	umber (	1-1-1-1-1-1
Name of Bank, Depos	orthrop Grumman FE	DERAL	CREDIT UNIO
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To print and file this form, select "Print" from the "File" menu above. In the "Print" window, select "Document" from the drop down menu labeled "Comments and Forms" Doing so will ensure that the icons and other instructions will not appear on your filing. Click here for a video printing demonstration.



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PREPARER (2/2015)	DATE PREPARED
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