Only

STATEMENT OF

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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. O'Rourke for Congress P.O. Box 1212 ADDRESS (number and street) (Check if address is changed) Rochester 03866 NH CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS campaign@orourkeforcongress.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) orourkeforcongress.com (Check if address is changed) DATE 2017 C00658344 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. O'Rourke, Alicia, Marie, , Type or Print Name of Treasurer O'Rourke, Alicia, Marie, , [Electronically Filed] 17 2017 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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TYPE OF COMMITTEE	
Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate info	ormation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign co	
information below.) Name of Candidate O'Rourke, Terence, Murphy, ,	
Candidate Party Affiliation DEM Office Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized	d committee.
Name of Candidate	
Party Committee:	/Domogratio
((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 of	n line 6.) Its connected organization is a
Corporation Corporation w/o Capital Stock	k 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 committee. (i.e., nonconnected committee)	Γ a separate segregated 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 Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, at least one of which is an authorized committee of a fed	•
(h) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal care	
Committees Participating in Joint Fundraiser	
1.	ber C
2.	ber C
3.	ber C
4.	ber C

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Write or Type Committee Nam		. 230
O'Rourke for C	ongress	
	Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
		<u> </u>
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person	on in possession of committee
O'Rourke	, Alicia, Marie, ,	
Mailing Address	P.O. Box 1212	
Maining / tauross		
	Rochester	03866
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
3. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; an assistant treasurer).	d the name and address of
Full Name O'Rourke, of Treasurer	, Alicia, Marie, ,	
Mailing Address	P.O. Box 1212	
		03866
Title or Position Treasurer	CITY STATE 603 Telephone number	ZIP CODE
<u> </u>		

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Full Name of Designated Agent	O'Rourke, Peter, William, ,	_
Mailing Address	P.O. Box 1212	
	Rochester NH 03866	
Title or Position		P CODE
Assistant Treas	urer 603 686 Telephone number 603 686	7950
Name of Bank, I	Citizens Bank	
• .	Depository, etc.	
Name of Bank, I	Depository, etc. Citizens Bank	
Name of Bank, I	Citizens Bank 1 North Main Street Rochester NH 03867	P CODE
Name of Bank, I	Citizens Bank 1 North Main Street Rochester CITY STATE ZIF	CODE
Name of Bank, I	Citizens Bank 1 North Main Street Rochester CITY STATE ZIF	CODE
Name of Bank, I	Citizens Bank 1 North Main Street Rochester CITY STATE ZIF Depository, etc.	P CODE
Name of Bank, I	Citizens Bank 1 North Main Street Rochester CITY STATE ZIF Depository, etc.	P CODE
Name of Bank, I	Citizens Bank 1 North Main Street Rochester CITY STATE ZIF Depository, etc.	CODE