## 2016 09 22 00 0000000

**FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

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Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) 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) (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) 39 117 Lois DATE C00583740 **FEC IDENTIFICATION NUMBER** IS THIS STATEMENT AMENDED (A) NEW (N) 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 Treasure 17/2015 Date Signature of Treasurer 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 02/2009) Toll Free 800-424-9530 Only

Local 202-694-1100

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political

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committees/organizations, at least one of which is an authorized committee of a federal candidate.

committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

(g)

(h)

Name of Any Connecto	ed Organization, Affiliated Committee, Joint Fundraising	Representative, or Le	adership PAC Spons
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Title or Position

Telephone number

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