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## STATEMENT OF ORGANIZATION

FORM 1			Office	Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Lilpup 2016				1
ADDRESS (number and street)	595 Browns Trace			
<ul> <li>(Check if address is changed)</li> </ul>				
	Jericho └──└── CITY ▲		VT         05465           STATE ▲	
COMMITTEE'S E-MAIL ADDRES	SS			
(Check if address is changed)	jbarring@uvm.edu			
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE ADD				
2. DATE 10 / 24				
3. FEC IDENTIFICATION NU	IMBER ► C c	00590539		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it i	s true, correct and co	mplete.
Type or Print Name of Treasurer	Jake Barrington			
Signature of Treasurer	Barrington	[Electronically Filed]	Date 10	24 / Y Y Y Y 2015
NOTE: Submission of false, errone		may subject the person signing th ON SHOULD BE REPORTED WI		nalties of 2 U.S.C. §437g.
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	ntact: FE	EC FORM 1 Revised 06/2012)

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	FEC Fo	rm 1 (Revised 02/2009) Page 2		
		OMMITTEE		
Ca	ndidate	e Committee:		
(a)	$\times$	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.)		
	ne of ndidate			
	ndidate ty Affiliati	on REP Office Sought: House Senate X President District		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	ne of Ididate			
Pa	rty Con	nmittee:		
(d)		This committee is a       (National, State or subordinate) committee of the       (Democratic, Republican, etc.) Party.		
Pol	litical A	ction 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.)		
Joii	nt Func	Iraising 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.		
	Com	mittees Participating in Joint Fundraiser		
	1.			
	2.	FEC ID number		
	3.	FEC ID number		
	4.			

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Write or Type Committee Name

## Lilpup 2016

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	l Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Sponsor
Overta diana of Deserveda dalar			

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Jake Barrir	ngton
Full Name	
Mailing Address	595 Browns Trace
	[
	Jericho         VT         05465
Title or Position	CITY STATE ZIP CODE
	Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Jake Barrington
Mailing Address	595 Browns Trace
	L
	Jericho         VT         05465
	CITY STATE ZIP CODE
	Telephone number       802       373       8127

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Full Name of Designated Agent	Jake Barrington
Mailing Address	595 Browns Trace
	VT05465
	CITY STATE ZIP CODE
Title or Position	
	Telephone number     802     -     373     -     8127

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

	Northfields Savings Bank		
Mailing Address	33 South Main Street		
	Northfield	VT 05663	
	CITY	STATE ZIP CODE	
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY	STATE ZIP CODE	