

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

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2013 OCT 31 AM 11:27

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

12 FEB 4 2015

FEC MAIL CENTER

Citizens For Veterans in Government

ADDRESS (number and street)



(Check if address  
is changed)

47 Flintlock Drive

Shirley

CITY ▲

NY

STATE ▲

11967

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address  
is changed)

nmpcm@aol.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address  
is changed)

2. DATE

10 / 22 / 2013

3. FEC IDENTIFICATION NUMBER ►

C

4. 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.

Type or Print Name of Treasurer

Nancy Marks

Signature of Treasurer

Nancy Marks

Date

10 / 22 / 2013

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  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

13031134309

## 5. TYPE OF COMMITTEE

**Candidate Committee:**

- (a) ☐ 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

Candidate  
Party AffiliationOffice  
Sought:

House

Senate

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of  
Candidate**Party Committee:**

- (d) ☐ This committee is a ☐ (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 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.

**Committees Participating in Joint Fundraiser**

1.  FEC ID number
2.  FEC ID number
3.  FEC ID number
4.  FEC ID number

C
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Write or Type Committee Name

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

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

Full Name

Nancy Marks

Mailing Address

47 Flintlock Drive

Shirley

NY

11967

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

Nancy Marks

Mailing Address

47 Flintlock Drive

Shirley

NY

11967

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

631-772-1900

13031134311

Full Name of  
Designated  
Agent

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

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.

Empire National Bank

Mailing Address

1044 Wm. Floyd Pkwy

Shirley

NY

11967

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

13031134312

POSTAGE REQUIRED

13031134313

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PLEASE NOTE:

When used internationally affix customs declarations (PS Form 2976, or 2976A).

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	\$18.11		
	US POSTAGE		
	Flat Rate Env		
	10/30/13	Commercial Base Pricing	Mailed from 11967 062S0000001301
<b>PRIORITY MAIL EXPRESS 1-DAY™</b>			
NANCY MARKS 47 FLINTLOCK DR SHIRLEY NY 11967-2758		Delivery Date: 10/31/13 <b>0007</b>	
		<b>C000</b>	
NO DELIVERY SUNDAY/HOLIDAY			
SHIP TO: FEDERAL ELECTION COMMISSION 999 E STREET N.W. WASHINGTON DC 20463-0001			
9481 7036 9930 0008 2579 97			
<b>POSTAL USE ONLY</b>			
Date In: Mo. Day Year		Time In: <input type="checkbox"/> AM <input type="checkbox"/> PM	
Day of Delivery: <input type="checkbox"/> Next <input type="checkbox"/> Second		<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	
Return Receipt: <input type="checkbox"/> COD		Additional Insurance Fee: \$0.00	

Place

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked 10/30/13
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<div style="display: flex; justify-content: space-between;"><div> PREPARER (8/2013)</div><div style="text-align: right;">31/13 DATE PREPARED</div></div>	

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