FEC FORM 1

STATEMENT OF ORGANIZATION

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2011 NOV 30 AM 8: 39

FORIVI I			F'E	COMMANDIGENTER
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Whelan For Cor	ngress			1
	,7447 N First Street, Suite	<u> </u>		
ADDRESS (number and street)				
(Check if address is changed)	Fresno		CA (93720
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE (Check if address is changed)	ESS (Please provide only on treasurerlawler@sbcglo	•		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL) www.whelanforcongress.	.com		
2. DATE 11 2	2011		1964	
3. FEC IDENTIFICATION N	IUMBER C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined t	this Statement and to the b	pest of my knowledge and belief	it is true, correct	and complete.
Type or Print Name of Treasure	_{er} Kelly Lawler		(
Signature of Treasurer Kelly I	1/. 1/.	lyHulla	Date L	2012011
NOTE: Submission of false, erron		ion may subject the person signing		the penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

'		1 1 (100000 002000)	<u>, </u>	
		COMMITTEE		
Can		e Committee:		
(a)	X	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.)		
Nam Cano	e of didate	Brian Whelan		
	didate	Office State	CA	
Party	/ Affiliati	ion KEV Sought: K House Senate President Distric	t 16	
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name Cand	e of lidate			
Par	ty Con	mmittee:		
(d)		(National, State (Democrati	c, , etc.) Party.	
Poli	tical A	Action Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected org	anization is a	
		Corporation Wo Capital Stock Labor On	ganization	
		Membership Organization Trade Association Cooperat	live	
		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 to a Lobbyist/Registænt PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Join	t Fund	draising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, at least one of which is an authorized committee of a federal candidate.	political	
(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	nmittees Participating in Joint Fundraiser		
	1.	FEC ID number		
	2.			
	3.		ACCORDING TOWNS SECTIONS	
		I		
	4.			

FEC Form 1 (Revis		Page 3
Whelan For C		
	ed Organization, Affiliated Committee, Joint Fundraising Representati	ive, or Leadership PAC Sponsor
NONE		
Mailing Address		
		J
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
demod .	in the second se	land of the second of the seco
	Identify by name, address (phone number optional) and position of the	e person in possession of committee
books and records.		
Kelly l Full Name	Lawler	
Mailing Address	976 Pacific Avenue	
	L	
	Willows CA	95988
		J
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	530 - 934 - 5823
8. Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of the committed.g., assistant treasurer).	tee; and the name and address of
Full Name Kelly t	Lawler	
of Treasurer		<u> </u>
Mailing Address	976 Pacific Avenue	
	Willows	95988
Title or Position	CITY STATE	ZIP CODE
Treasurer	1	530 1 1 934 1 1 5823

530 - 934 -

Telephone number

5823

TEC TOTAL T (IX			1 agc -1
Full Name of			
Designated			
Agent L		 	
Mailing Address			
	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 1 1 . 1 1	:
	CITY	STATE	ZIP CODE
Title or Position			
1 , , , , , , ,	Telepho	one number	<u> </u>
			
Banks or Other Depos	sitories: List all banks or other depositories in which the	committee deposits fund	ds, holds accounts, rents
safety deposit boxes or			
Name of Bank, Deposit	ory, etc.		
Tei (Counties Bank		
	Counties Bank		
Matthew Address	_I 210 N Tehama		
Mailing Address			<u> </u>
		<u> </u>	<u> </u>
	Į Willows	I CA I	95988
	CITY	STATE	ZIP CODE
Name of Bank, Deposit	ory atc		
Name of Bank, Beposit	ory, etc.		
Wa	chovia Bank	1 1 1 1 1 1 1 1	
	100 N Main Street		
Mailing Address			
		1 1 1 1 1 1 1 1	
	, Winston Salem	, , NC ,	27150
	vilision Salem	ا لتا لــ	
	CITY	STATE	ZIP CODE
	CITI	JINIL	AIF CODE

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Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
. Ne	ext Business Day Delivery
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Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Imp	11/31/11
PREPARER	DATE PREPARED

(3/2005)