

AMENDED Statement of Organization

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

UNIFIED COMMITTEE FOR SUCH A TIME AS THIS TO ELECT SHELIA MARIAH BOLAR TO THE 2016 U.S. PRESIDENCY
ADDRESS (number and street) 1900 TREE MOUNTAIN PKWY, #6801

(Check if address is changed)
STONE MOUNTAIN CITY ▲ GA STATE ▲ 30083 ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) valobsystemsconsulting2@gmail.com
Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) Under Construction

2. DATE 07/30/2015

3. FEC IDENTIFICATION NUMBER C00570077

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 SHELIA M. BOLAR

Signature of Treasurer Shelia M. Bolar Date 07/30/2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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 SHELIA MARIAN BOLAR

Candidate Party Affiliation END Office Sought: House Senate President State GA 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 NAT (National, State or subordinate) committee of the END (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 <u>C</u>
2.	_____	FEC ID number <u>C</u>
3.	_____	FEC ID number <u>C</u>
4.	_____	FEC ID number <u>C</u>

Write or Type Committee Name

UNIFIED COMMITTEE FOR SUCH A TIME AS THIS
TO ELECT SHELLA MARIAH BOLAR

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

[Empty grid for organization name]

Mailing Address

[Empty grid for 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

SHELLA MARIAH BOLAR

Mailing Address

1900 Tree Mountain Pkway, #6801
(Stone Mountain)
Stone Mountain GA 30083

Title or Position CITY STATE ZIP CODE

CHAIRMAN/TREASURER/CUSTODIAN Telephone number 323-219-7060

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

SHELLA MARIAH BOLAR

Mailing Address

1900 Tree Mountain Pkway, #6801
STONE MOUNTAIN GA 30083

Title or Position CITY STATE ZIP CODE

CHMN; TREASURER, CUSTODIAN Telephone number 323-219-7060

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Full Name of Designated Agent

SHEILA MARIAN BOLAR

Mailing Address

1900 Tree Mountain Pkwy #6804

Stone Mountain GA 30083
CITY STATE ZIP CODE

Title or Position

CHMN, TREASURER, CUSTODIAN OF RECORDS

Telephone number 323-219-2060

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.

Armed Forces Bank

Mailing Address

(Account is expected to be established as of Sept 1, 2015 (sorry for delay))
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

WELLS FARGO BANK

Mailing Address

(Account should be established no later than Sept 1, 2015)
CITY STATE ZIP CODE

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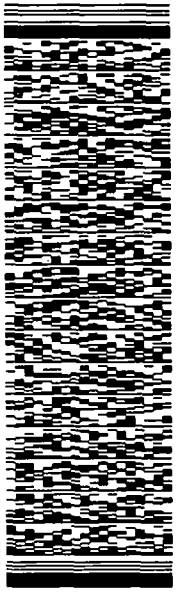
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WASHINGTON DC 20463

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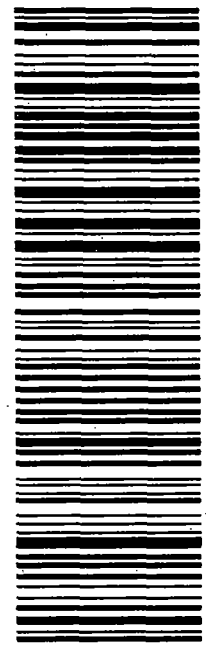


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Received from House Records & Registration Office Date of Receipt

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 PREPARER

8/3/15
 DATE PREPARED

20150803 10:00:00 AM