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FEC FORM

Only

STATEMENT OF ORGANIZATION

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FORM 1 NAME OF Example: If typing, type (Check if name FEC MAIL CENTER 12FE4M5 COMMITTEE (in full) is changed) over the lines. Indone For Congress ADDRESS (number and street) (Check if address is changed) STATE A ZIP CODE A **COMMITTEE'S E-MAIL ADDRESS** (Check if address Diarymororier 1,2, @ b, o, timg, i, l, com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address LUNU. moiore for congressis is changed) 01 09 2014 DATE FEC IDENTIFICATION NUMBER IS THIS STATEMENT OR NEW (N) 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. Gwendolyn K. Wharton Type or Print Name of Treasurer Twendoly K Wharton 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 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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. 20 1						
	COMMITTEE					
(a) X	e Committee: 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	Wohnny moore					
Candidate	Office State CH					
Party Affilia	tion OEM Sought: X House Senate President District 49					
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
Party Co	mmittee:					
(d)	This committee is a or subordinate) committee of the Republican, etc.) Party.					
Political A	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 Fun	draising Representative:					
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/grganizations, at least one of which is an authorized committee of a foderal candidate.					
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political					
i.h	committees/organizations, none of which is an authorized committee of a federal candidate.					
Cor	nmittees Participating in Joint Fundraiser					
1.	FEC ID number C					
2.	FEC ID number C					
3.	FEC ID number					
4.						

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FEC Form 1 (Revised 02/2009)					
Write or Type Committee Nam	ne				
Moore for	Congress				
	Organization, Affiliated Committee, Joint Fundraising Representative	, or Leadership PAC Sponsor			
FIRENDISI IOIFI	dolhany molare				
Mailing Address	21712181 Frontier 4n 1111				
	McKinnely	7,5,0,7,1			
	CITY STATE	ZIP CODE			
7	Variation (Caracian)	and the state of t			
Relationship: Connect	ed Organization XAffiliated Committee Joint Fundraising Represent	ative : Leadership PAC Sponsor			
	<u> </u>				
 Custodian of Records: Identification books and records. 	entify by name, address (phone number optional) and position of the p	person in possession of committee			
Full Name Mark	i.l.y.n. maane				
Mailing Address	1217128 innomitien Line				
		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
	mic Kaininery TIX	71501711-			
Title on Deside	·				
Title or Position	CITY STATE	ZIP CODE			
Bioloiki Kieleipie	Telephone number	1712]-151417]-16181415			
Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee assistant treasurer).	e; and the name and address of			
Full Name of Treasurer	indoilyin it whairition				
Mailing Address	19,20131 Hiercition Hiller 1111				
	Bigin Diregoli LA	912112131-			
- 10 - 11	CITY STATE	ZIP CODE			
Title or Position	· · · · · · · · · · · · · · · · · · ·	[_] [_]			
1111001510111011	Telephone number	<u> </u>			

FEC Form 1 (Re	vised 02/2009)		Page 4			
Full Name of Designated Agent 71,0	riiliyini moioinei					
Mailing Address	2,7,2,8, Firiantineiri L	M				
		111111				
	Mª KI MIMELY CITY	TIXI STATE	715101711 - LILI ZIP CODE			
Title or Position		lo.	l le le a el			
AISISILISITIQIA	Tel Trie a Sivirie r	lephone number [9]	712 - 51417 - 6181415			
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.						
<u>We</u>	1.1.1.51 Fiarigioisi Bainiti 1					
Mailing Address	1814151 1C1011/1e19191 1B1/1V1	diiiiii				
	Occesside	LA CA	9,2,0, 1-			
	CITY	STATE	ZIP CODE			
Name of Bank, Deposite	ory, etc.					
<u></u>						
Mailing Address						
		ليا لين				
	CITY	STATE	ZIP CODE			

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Fecleral Election Commission 1999 E. Street.

NW, Washington, D.C.

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PREPARER (8/2013)	DATE PREPARED			