FEC FORM 1	STATEMEN ORGANIZA		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
			TEE
ADDRESS (number and street)	9696 LUCE RD		
(Check if address is changed)	GUYS MILLS CITY ▲		PA 16327   STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address is changed)			
	Optional Second E-Mail Add	Iress	
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)		
2. DATE 05 / 1			
3. FEC IDENTIFICATION N	UMBER ► C co	00520304	
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)	
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	SANDERA, ROB, , ,		
Signature of Treasurer	DERA, ROB, , ,	[Electronically Filed]	Date 05 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0
NOTE: Submission of false, erron		may subject the person signing the DN SHOULD BE REPORTED W	his Statement to the penalties of 2 U.S.C. §437g. ITHIN 10 DAYS.
Office Use Only		For further information cc Federal Election Commissic Toll Free 800-424-9530 Local 202-694-1100	

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	FI	EC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
	TYPE	OF C	OMMITTEE	
	Cand	didate	e 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 information below.)	the candidate
	Name Candio		SANDERA, ROBERT, , ,	
	Candio Party	date Affiliatio	on DEM Sought: House Senate Y President	State
(	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candio			
-	Party	/ Con	nmittee:	
(	(d)			ocratic, blican, etc.) Party.
I	Politi	ical A	ction Committee (PAC):	
(	e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
			Corporation Corporation w/o Capital Stock	or Organization
			Membership Organization Trade Association Cod	operative
			In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee. (i.e., nonconnected committee)	ated fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
_			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
J	loint	Fund	draising Representative:	
(9	g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(ł	ו)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or i committees/organizations, none of which is an authorized committee of a federal candidate.	nore political
		Com	mittees Participating in Joint Fundraiser	
		1.	FEC ID number	
		2.	FEC ID number	
		3.	FEC ID number	
		4.	FEC ID number	

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Write or Type Committee Name

## ROBERT SANDERA FOR PRESIDENT COMMITTEE

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

Mailing Address								
		CITY	STATE	ZIP CODE				
Relationship:	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.								

SANDER	A, ROB, , ,
Full Name	
Mailing Address	9696 LUCE RD.
	GUYS MILLS PA 16327   - - -
Title or Position	CITY STATE ZIP CODE
	Telephone number 814 - 789 4937

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	SANDERA, ROB, , ,	 		1
Mailing Address	9696 LUCE RD.			
		PA	16327	
	CITY	STATE		ZIP CODE

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Full Name of Designated Agent																									1			
Mailing Address																												
												1																
							C	'TI	ſ								ST	ATE					ZI		OD	Ε		
Title or Position																												
												Те	lepł	non	e n	um	ber											

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.
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CHEM		
Mailing Address	2263 West Houghton Lake Drive	
		MI 48629
	CITY	STATE ZIP CODE
Name of Bank, Depository,	etc.	
Mailing Address		
	CITY	STATE ZIP CODE