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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) The Friends of Mr. James Jerome Bell for President Post Office Box 606062 ADDRESS (number and street) (Check if address is changed) Cleveland 44106 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jamesbell283@yahoo.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2015 C00580407 FEC IDENTIFICATION NUMBER > 3. X 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. MS. BELLE LETTRES Type or Print Name of Treasurer MS. BELLE LETTRES [Electronically Filed] 06 30 2016 Signature of Treasurer Date 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 Only Local 202-694-1100

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	E OF COMMITTEE Indidate 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.)			
	ne of didate	Mr. James Jerome Bell			
	didate y Affiliati	on IND Office Sought: House Senate X President	State		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	ne of didate				
Par	ty Con	nmittee:	(Domogratic		
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.		
Pol	itical A	ction Committee (PAC):			
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.)			nnected 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 fur 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.)			
Join	nt Fund	Iraising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political		
	Com	mittees Participating in Joint Fundraiser			
	1.	FEC ID number			
	2.	FEC ID number			
	3.				
	4.				
	т.				

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Write or Type Committee Nam	пе	
The Friends of	Mr. James Jerome Bell for President	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or L	_eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the perso	n in possession of committee
Full Name Ms. BELI Ms. deling Address	LE LETTRES 11104 WOODSTOCK AVENUE	
	CLEVELAND OH	44104
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 216	231 6083
 Treasurer: List the name ar any designated agent (e.g., 	nd address (phone number optional) of the treasurer of the committee; and assistant treasurer).	I the name and address of
Full Name MS. BELL of Treasurer	LE LETTRES	
Mailing Address	11104 WOODSTOCK AVENUE	
	CLEVELAND OH 14	14104
	CITY STATE	ZIP CODE
Title or Position Treasurer	Z16 Telephone number	6083

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Full Name of Designated	WARREN L. BOWENS	
Agent		
Mailing Address	5349 THOMAS AVENUE	
	MAPLE HTS. OH 44137	,
	CITY STATE	ZIP CODE
Title or Position		200 - 2288
Mailing Address	OHIO'S FIRST CLASS CREDIT UNION 1800 CARNEGIE AVENUE CLEVELAND OH 21624	-1108
	CITY STATE	ZIP CODE
Name of Bank,		
		1
Mailing Address		
Mailing Address		
Mailing Address		