Prosperity First, Inc. Post Office Box 373 Fairfax Station, VA 22039 RECEIVED !

2012 APR -2 PM 12: 18
FEC MAIL CENTER

March28, 2012

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Re: Form 1, Statement of Organization—Unlimited Contributions Prosperity First, Inc.: C

To Whom It May Concern:

This committee intends to make independent expenditures and, consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. F.E.C.*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

My Blehr

George Rehn

Treasurer

12030762365

FEC FORM

STATEMENT OF ORGANIZATION

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2012 APR -2 PM 12: 18

PONIVI I				<u> </u>	<u> </u>	C Office Use GRANTEK
NAME OF COMMITTEE (in full)	un	(Check if name is changed)		ole:If typing, type he lines.	12FE4M	manganersymmetric 5
Prosperity First, Inc.	1.1.1		<u> </u>		1 1 1 1	
	1 1 1		<u>1_1_L_</u> 1			
ADDRESS (number and street)	POE	373				
(Check if address is changed)	Fairfa	ax Station			VA	22039
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES		se provide only one e		ess)		
(Check if address is changed)		<u> </u>	l L i	1.1.1.1.1.1.	1 1 1 1	
COMMITTEE'S WEB PAGE ADD	ORESS (URL)				
(Check if address is changed)		·				
2. DATE 0 3 2	8	2 0 1 2				
3. FEC IDENTIFICATION NU	IMBER	C		ا معمر محمد والمستوادة الم		
4. IS THIS STATEMENT	NE	W (N) OR	Carl Carl	AMENDED (A)		
I certify that I have examined th	is Staten	nent and to the best	of my kne	owledge and belief it	is true, correc	t and complete.
Type or Print Name of Treasurer	Geo	rge Rehn				
Signature of Treasurer	B	y de	lu		Date 0	3 28 2012
NOTE: Submission of false, erroned		complete information	•			
Office Use Only			Fe	or further Information conderal Election Commission Free 800-424-9530 cal 202-694-1100		FEC FORM 1 (Revised 02/2009)

		7 (Nevisea 02/2000)
	•	COMMITTEE 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.)
Nam Can	e of didate	
	didate / Affiliat	Office State on Sought: House Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Nam Cand	e of lidate	
Par	ty Con	nmittee:
(d)		(National, State (Democratic, This committee is a republican, etc.) Party.
Poli	tical A	ction 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)	X	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.)
Join	t Fund	raising 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.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	FEC ID number C
•	3.	FEC ID number C
	4.	FEC ID number C

FEC Form 1 (Revise	d 02/2009)	Page 3
Write or Type Committee Na	ime	
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
	<u> </u>	
	 	
Mailing Address		
• · · ·	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: lo	dentify by name, address (phone number optional) and position of the person	in possession of committee
Full Name Ronald	M. Jacobs	
Mailing Address	Venable LLP	
·	575 Seventh Street, NW	
	Washington	20004
Title or Position	CITY STATE	ZIP CODE
Counsel	Z02 Telephone number] 4000
. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and , assistant treasurer).	the name and address of
Full Name George of Treasurer	Rehn	<u> </u>
Mailing Address	P.O. Box 373	
	Fairfax Station VA	22039
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	- - - - - - - - - - - - - -

	1 (Revised 02/2009)		Page 4
Full Name of Designated Agent	Meghan Deltry		
Mailing Address	P.O. Box 373		
		<u> </u>	
	Fairfax Station	, , , , , , , , , , , , , , , , , , ,	22039
	CITY	STATE	ZIP CODE
Title or Position Assistant Trea	surer	Telephone number	<u></u>
Banks or Other	Depositories: List all banks or other depositories in		a fireda halda accessor accessor
	xes or maintains funds.	which the committee deposit	s lunds, noids accounts, rents
safety deposit bo Name of Bank, D	xes or maintains funds.	which the committee deposit	s lunds, noids accounts, rents
Name of Bank, D	xes or maintains funds. Depository, etc.	which the committee deposit	s lunos, noios accounts, rents
Name of Bank, C	xes or maintains funds. lepository, etc. Chain Bridge Bank	which the committee deposit	s lunos, noios accounts, rents
Name of Bank, C	xes or maintains funds. lepository, etc. Chain Bridge Bank	which the committee deposit	22101 5737
Name of Bank, D	ces or maintains funds. Chain Bridge Bank 1445-A Laughlin Avenue		
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify): **DATE PREPARED**