

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2014 DEC 24 AM 8:31 Office Use Only

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

12FE4M5

RAMOS FOR AMERICA

ADDRESS (number and street)

PO Box 541139

(Check if address is changed)

FLUSHING

CITY

NY

STATE

11354

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

INFO@LUIS RAMOS FOR PRESIDENT 2016.COM

Optional Second E-Mail Address

LUIS RAMOS1960@YMAIL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

WWW.LUIS RAMOS FOR PRESIDENT 2016.COM

2. DATE

12 / 12 / 2014

3. FEC IDENTIFICATION NUMBER

C00492694

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

LUIS RAMOS

Signature of Treasurer

*Luis Ramos*

Date

12 / 12 / 2014

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.

Office Use Only				
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For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

1-800-424-9530

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 LUIS RAMOS

Candidate Party Affiliation  Office Sought:  House  Senate  President State NY District 40

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate LUIS RAMOS

Party Committee:

(d)  This committee is a  (National, State or subordinate) committee of the  (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 at:
  - 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.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/>
2.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/>
3.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/>
4.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/>

2009-11-10 10:10:10

Write or Type Committee Name

RAMOS FOR AMERICA

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

Mailing Address

PO BOX 541139

FLUSHING

CITY

NY

STATE

11354

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

CNE

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

LUIS RAMOS

Mailing Address

PO BOX 541139

FLUSHING

CITY

NY

STATE

11354

ZIP CODE

Title or Position

TREASURER

Telephone number

347-225-3102

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

LUIS RAMOS

Mailing Address

PO BOX 541139

FLUSHING

CITY

NY

STATE

11354

ZIP CODE

Title or Position

Treasurer

Telephone number

347-225-3102

UNCOLL - INFO - HANDBOOK

Full Name of Designated Agent

LUIS RAMOS

Mailing Address

PO BOX 541139

FLUSHING

CITY

NY

STATE

11354

ZIP CODE

Title or Position

Designated Agent

Telephone number

347-225-3102

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.

HSBC BANK 631-821-1643

Mailing Address

ROUTE 25A

MILLER PLACE

CITY

NY

STATE

11769

ZIP CODE

Name of Bank, Depository, etc.

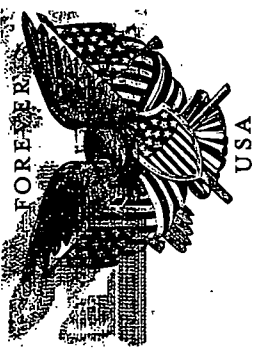
Mailing Address

CITY

STATE

ZIP CODE

ACCOUNT - 0101 - 1004



UNION  
RICHMOND VA 230  
10 DEC 2014 PM 31

FLUSHING, N.Y. 11354  
P.O. Box 571139

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FEC  
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20463

Federal Election Commission  
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 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
 PREPARER

12/24/14  
 DATE PREPARED

11/19/14 10:00 AM