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FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2011 SEP 15 AM 8: 45

FEC MAIL CENTER

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	5		
Britton f	ar Congres	<u>S </u>				
ADDRESS (number and street)	6614 C1	ayton Rd.	#148	4 4 1 1 1 1 1 1 1 1 1		
(Check if address						
is changed)	ST. Louis		MO	63117-		
	•	CITY	STATE	ZIP CODE		
COMMITTEE'S E-MAIL ADDRES	COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)					
(Check if address	Candicebrit	son id candi ce	britton	no Com		
is changed)		<u> </u>	1111			
COMMITTEE'S WEB PAGE ADI	DRESS (URL)					
		ttonicomi	1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·		
(Check if address is changed)						
2. DATE 08 30 40 11						
3. FEC IDENTIFICATION NUMBER C						
4. IS THIS STATEMENT X	NEW (N) OR	AMENDED (A)				
I certify that I have examined th	is Statement and to the best	of my knowledge and belief	it is true, correc	et and complete.		
Type or Print Name of Treasurer Candice Britton Signature of Treasurer Candice Bullin Date 08 30 2011						
Signature of Treasurer	andice Br	etten	Date O	8 30 2011		
NOTE: Submission of false, erreneous, 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 Use Only		For further Information Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)		

5.

TYPE OF CO	OMMITTEE			•				
	Commisse:							
(a) X	This committee is a pri	ncipal campaig	n commi	ittee. (Comp	lete the candidate	information below	ı.)	
(b)	This committee is an a information below.)	uthorized comm	nittee, a	nd is NOT a	principal campaign	n committee. (Co	mplete the cand	idate
Name of Candidate		ze B	rit	ton		1111		لــــا
Candidate Party Affiliation	on DEM	Office Sought:	X	House	Senate	President	State District	0 l W 0
(c)	This committee support	s/opposes only	one ca	ndidate, and	is NOT an authori	zed committee.		
Name of Candidate			111			11111		
Party Com		*·*·						
(d)	This committee is a		or sul	•	ommittee of the		(Democratic, Republican, etc	•
Political A	ction Committee (P							
(e)	This committee is a se	parate segrega	ted fund	. (Identify co	nnected organizatio	n on line 6.) Its co	onnected organiz	ation is a:
	Corporation			Corpor	ation w/o Capital S	tock	Labor Organ	ization
	Membership O	rganization		Trade /	Association		Cooperative	
	In additi	on, this commit	lee is a l	Lobbyist/Reg	istrant PAC.			
(f)	This committee suppor committee. (i.e., noncom	• •		one Federal	candidate, and is !	NOT a separate s	segregated fund	or party
	In addition, this	committee is a	_obbyist/	/Registrant F	AC.			
				•	entify spensor on line	•		
Joint Fund	raising Representa				···			
(g)	This committee collects committees/organization							tical
(h)	This committee collects committees/organization						two or more polit	ical
Com	mittees Participating in	n Joint Fundra	aiser					
1.					FEC ID n	umber C		
2.					FEC ID n	umber C		•
3.					FEC ID n	umber C		
4.					FEC ID n	umber C		

Write or Type Committee Name

	Britton fo	r Congress	
6. Name of Any Connected O	rganization, Affiliated Committee,	Joint Fundraising Representative, o	or Leadership PAC Sponsor
Mailing Address			
	СПУ	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee	e Joint Fundraising Representati	ve Leadership PAC Sponsor
 Custodian of Records: Iden books and records. 	tify by name, address (phone number	or optional) and position of the per	rson in possession of committee
SUNSON L. Co.	ndice Britte	. 	
	16614 Clay		
Mailing Address	L		
	ST. Louis	M.O	16.3.1.1.7+-
Title or Position	CITY	STATE	ZIP CODE
Candidate/Tra	94 Surer/Book Keeper	Telephone number	
B. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional assistant treasurer).	of the treasurer of the committee;	and the name and address of
Full Name of Treasurer	ndice Britto		
Mailing Address	16614 Clayt	on Rd. #148	
		111111111	
	ST. LOUVS	M.Q. STATE	ZIP CODE
Title or Position [Candidate / Tr	easurer/Bookkeeph	Telephone number	لــــا-لـــا

9.

Full Name of Designated Agent	dice Britton		
Mailing Address	6614 Clayton Rd. #1	48	
		 	
	ST. Louis	MO STATE	163117- ZIP CODE
Title or Position			
Candidate/ T	Telephone nu	mber	
	·		
Banks or Other Depositors afety deposit boxes or main Name of Bank, Depository,		ttee deposits	funds, holds accounts, rents
سلبا	indell Bank	 	
Mailing Address	6900 Clayton AVE		
		1-1-1-1	
	ST. Louis	MO	63139-
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.	· · · · · · · · · · · · · · · · · · ·	
لبنا	<u> </u>		
Mailing Address			
		ليا	
	CITY	STATE	ZIP CODE

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 Postmarke/d **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): **PREPARER** DATE PREPARED

(3/2005)