12030892399

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

		2012 OCT only us Mmg: L	مصيات
1. NAME OF COMMITTEE (in full)	(Check if name Example: If is changed) ever the lin	typing, type 12FFEWSMAIL CENTER es.	
Rex Bell	FIDER COMIGNESISI	<u> </u>	
	1111111		لــــا
ADDRESS (number and stre	on 17059 State Ro	naid 38: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(Check if address is changed)		 	لـــا
	Hagerstown 1	STATE A ZIP CODE A	لــــا
COMMITTEE'S E-MAIL AL	DDRESS		
(Check if address is changed)	ss reximbel 7 Qms noc	.c.m	
	Optional Second E-Mail Address		,
			لب
COMMITTEE'S WEB PAG	E ADDRESS (URL)		
(Check if addressis changed)	ss	 	
• .	1		1
			لللا
2. DATE 0 9 '	2° žo i Ž		
3. FEC IDENTIFICATIO	ON NUMBER ► C		
4. IS THIS STATEMENT	NEW (N) OR A	MENDED (A)	
I certify that I have exami	ned this Statement and to the best of my knowled	lge and belief it is true, correct and complete.	سنية فيه السن در
Type or Print Name of Tre	asurer Rex Bell		
Signature of Treasurer	Ly Bell	Data ÖĢ 26 20	ĭž
NOTE: Submission of false,	erroneous, or incomplete information may subject the ANY CHANGE IN INFORMATION SHOULD B	e person signing this Statement to the penalties of 2 U.S.C. E REPORTED WITHIN 10 DAYS.	§437g.
Office Use Only	Federal Toll Fre	ther information contact: Bection Commission FEC FORM 1	

TYPE OF C	OMMITTEE • Committee:						
(a)	This committee is a princ	ipal campaign co	mmittee. (Comple	te the candidate in	formation below	<i>i</i> .)	
(p)	This committee is an authinformation below.)						date
Name of Candidate	1	1 1 1 1 1	1 1 1 1 1 1		1 1 1 1 1	1 1 1 1	Lii
Candidate Party Affiliati	on LIB	Office Sought:	House	Senate	President	State	ĽN O6
(c)	This committee supports/	opposes only one	e candidate, and i	s NOT an authoriza	ed committee.	District	
Name of Candidate							
Party Con	nmittee:						•
(d)	This committee is a	Ò	Vational, State r subordinate) cor	nmittee of the		(Democratic, Republican, etc	c.) Party.
Political A	ction Committee (PAC			· · · · · · · · · · · · · · · · · · ·			
(e)	This committee is a sepa	rate segregated t	fund. (Identify con	nected organization	on line 6.) Its co	onnected organiz	ation is a:
	Corporation		Corporat	ion w/o Capital Sto	ck	Labor Organ	ization
	Membership Orga	anization	Trade /0	seciation		Cooperative	
	in addition	, this committee is	s a Lobbyist/Regis	trast PAC.			
(f)	This committee supports/ committee. (i.e., nonconne		an one Federal c	andidate, and is No	OT a separate	segregated fund	or party
	In addition, this committee is a Labbyist/Ragistrant PAC.						
	-		lership PAC. (Iden	tify sponsor on line	6.)		
Joint Fund	Iraising Representativ		****	to two distributions of t	t i distance e e estado		,
(g)	This committee collects co	ntributions, pays					ical
(h)	This committee collects co committees/organizations,					two or more politi	ical
Com	mittees Participating in .	loint Fundraise	r				
1.				FEC ID nu	uper C		
2.				PEC ID nu	mber C		
3.				FEC ID nu	mber C		
4.				FEC ID nur	mber C		

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٧	Vrite or Type Committee Name		
	Rex	Bell to: Congress	
		organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Snonsor
6.	Name of Any Commedia:	Agentzeron, Amirico Constitute, sont renetationy representativo, et accessive,	I PAU Spuiso.
į			
<u></u>			
L	Address Address		'
	Mailing Address		<u> </u>
		CITY STATE Z	IP CODE
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Leade	ership PAC Sponsor
	·	_	•
 7.	Contaction of Records: Idea	ntify by name, address (phone number optional) and position of the person in posse	
,.	books and records.	my by raino, audioso (priorio rialibus opaulas) and pounds to all person in person	DSIOII OI VOIIIIIIII
	۸.	9	
	Full Name KRIL	Beili	1 1 1 1 1
	Mailing Address	117,0,59,5t, Rd. 38, 11, 11, 11, 11	
		Haweristown 11 IN 473	14-1
		. 3	
	Title or Position	CITY STATE ZI	P CODE
	1	Telephone number	. 1_1
			الملك
8.	Treasurer: List the name an	d address (phone number - optional) of the treasurer of the committee; and the name	and address of
-	any designated agent (e.g.,		, што спи
	Full Name of Treasurer	Bel. 1	11111
	Mailing Address	117,059, 151+ Rd 38	
	•	<u> </u>	1 1 1 1 1
		Hagrestown IN 14734	
		•	P CODE
	Title or Position		
		Telephone number	
•			

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ZIP CODE

Name of Bank, Depository, etc.

FEC Form 1 (Revised 02/2009)

Mailing Address

Line In the content of the content

STATE

CITY

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): 10/4/12 DATE PREPARED

(3/2005)