

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)
-
(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

[]
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$\square$
2. DATE
3. FEC IDENTIFICATION NUMBER

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.


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 <br> Use <br> Only |
| :--- | :--- | :--- | :--- | :--- | :--- |

5. TYPE OF COMMITTEE Oandidate 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.)

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

Name of Candidate

## 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 a:

| Corporation |  | Corporation w/o Capital Stock |  | Labor Organization |
| :--- | :--- | :--- | :--- | :--- | :--- |
| Membership Organization | P | Trade Association | Cooperative |  | 1 In addltion, this committee is a Lobbyist/Registrant PAC.

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.
5
In abditian, this committee is a Leadership PAC. (Identify sponyor 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. 



Write or Type Committee Name

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

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

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


Mailing Address
 Kewngshaind w．．．．．．｜AA $\square$
Title or Position

CITY
StATE
ZIP CODE

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
Mailing Address


Title or Position

Telephone number $\quad|8,7,0|-(3,5,2 \mid-2,5,4,8]$


Title or Position
Li LM 1
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.
CE ANTE, $N_{N} N_{1}: A_{1} l_{1} B K \ldots$
Mailing Address balM St


Name of Bank, Depository, etc.


Federal Election Commission
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