**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Luke Palmieri 6208 Isleworth Dr. ADDRESS (number and street) (Check if address is changed) Glen Allen 23059 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS lukepalmieri4@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 02 2015 C00588574 FEC IDENTIFICATION NUMBER > 3. × 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. Luke Palmieri Type or Print Name of Treasurer Luke Palmieri [Electronically Filed] 10 02 2015 Signature of Treasurer Date 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FF0 F	2 2
FEC Form 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF COMMITTEE  Candidate Committee:	
(a) X This committee is a principal campaign committee. (Complete the candidate information	on below.)
(b) This committee is an authorized committee, and is NOT a principal campaign commit information below.)	ttee. (Complete the candidate
Name of Candidate Luke Palmieri	
Candidate Party Affiliation  NPA  Office Sought: House  Senate  Property Affiliation	State esident District
(c) This committee supports/opposes only one candidate, and is NOT an authorized com	nmittee.
Name of Candidate	
Party Committee:	(Domogratic
(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 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 secommittee. (i.e., nonconnected committee)	eparate segregated fund or party
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 procommittees/organizations, at least one of which is an authorized committee of a federal of	
(h) This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, none of which is an authorized committee of a federal candidate.	eeds for two or more political
Committees Participating in Joint Fundraiser	
1.	
2. FEC ID number	
3.	
4.	

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Write or Type Committee Na		. 250
Luke Palmieri		
	ed Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
7. <b>Custodian of Records:</b> books and records.	Identify by name, address (phone number optional) and position of the persor	ı in possession of committee
	Palmieri	
Full Name	,6208 Isleworth Dr.	
Mailing Address		
		20050
	Glen Allen VA 2	23059
Title or Position	CITY STATE	ZIP CODE
	Telephone number	]
3. <b>Treasurer</b> : List the name any designated agent (e.	and address (phone number optional) of the treasurer of the committee; and g., assistant treasurer).	the name and address of
Full Name Luke P of Treasurer	almieri	
Mailing Address	6208 Isleworth Dr.	
		3059
Title or Position	CITY STATE	ZIP CODE
_	Telephone number	]

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Full Name of Designated	Luke Palmieri	
Agent		
Mailing Address	6208 Isleworth Dr.	
	Glen Allen VA 23059	
	CITY STATE	ZIP CODE
Title or Position		_
	Telephone number	
Name of Bank,	Wells Fargo Bank	
Mailing Address	11290 Nuckols RD	
	Glen Allen VA 23059	
	CITY STATE	
_		ZIP CODE
Name of Bank,		ZIP CODE
Name of Bank,		ZIP CODE
Name of Bank, I	Depository, etc.	ZIP CODE
	Depository, etc.	ZIP CODE
	Depository, etc.	ZIP CODE