

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

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

12FE4M5

FRIENDS OF BERNIE SANDERS

ADDRESS (number and street)

PO BOX 391

(Check if address is changed)

BURLINGTON

CITY ▲

VT

STATE ▲

05402

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

lora@bluewavepolitics.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

12 / 17 / 2018

3. FEC IDENTIFICATION NUMBER ►

C C00411330

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 Haggard, Lora, , ,

Signature of Treasurer

Haggard, Lora, , ,

[Electronically Filed]

Date

12 / 17 / 2018

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 Use Only

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

FEC FORM 1  
(Revised 06/2012)

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 Sanders, Bernard, , ,

Candidate Party Affiliation  IND Office Sought:  House  Senate  President State  VT District  00

- (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  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.  FEC ID number C
2.  FEC ID number C
3.  FEC ID number C
4.  FEC ID number C

Write or Type Committee Name

# FRIENDS OF BERNIE SANDERS

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

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 Haggard, Lora, , ,

Mailing Address P.O. Box 391

Burlington

VT

05401

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 423 - 443 - 3308

**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 Haggard, Lora, , ,

Mailing Address P.O. Box 391

Burlington

VT

05401

Title or Position Treasurer

Telephone number 423 - 443 - 3308

Full Name of Designated Agent: Haggard, Lora, , ,  
Mailing Address: P.O. Box 391  
Burlington VT 05401  
CITY STATE ZIP CODE  
Title or Position: Treasurer Telephone number: 423 - 443 - 3308

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.

People's Bank (Chittenden Bank)

Mailing Address: 2 Burlington Square  
P.O. Box 820  
Burlington VT 05402  
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Northfield Savings Bank

Mailing Address: P.O. Box 347  
Northfield VT 05663  
CITY STATE ZIP CODE



Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundraising Participant:

1.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
2.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
3.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

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

Mailing Address

Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  
 Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name   
Mailing Address   
  
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 Telephone Number --

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. Vermont State Employee's Credit Union  
Mailing Address P.O. Box 67  
  
Montpelier VT 05601  
CITY ▲ STATE ▲ ZIP CODE ▲