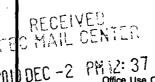
FEC FORM 1

Office

Use

Only

STATEMENT OF ORGANIZATION



		2	Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Robert le	lei imainini ingi is	Siri iFiori iPirieis	siidenti
ADDRESS (number and stre	et) 140019 15. 1	tiaiwithioirinie is	BILIVICE
(Check if address is changed)	i s		
- -	Lia with or inc	2 1 1 1 1 1 1 1 1	[Ca] 90,250 - 7,003 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL AD	DRESS		
(Check if address is changed)	Sipiqicieitiim	eixi Piainisi i ioini oe	voili-icio Milliani
	Optional Second E-Mail A	ddress	
COMMITTEE'S WEB PAGE	F ADDRESS (URL)		
(Check if addres		01210 Piries ii dien	ntc.m.m
is changed)			
2. DATE	27 2019		
3. FEC IDENTIFICATIO	IN NUMBER • C	ngan gering ing magasigan ga la nggi. M	
	· · · · · · · · · · · · · · · · · · ·		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examin	ned this Statement and to the bes	st of my knowledge and belief	it is true, correct and complete.
Type or Print Name of Trea	asurer Pobert Le	e Wanning S	2.
Signature of Treasure	Zoleo)	and	Date (27 25 (9)
NOTE: Submission of false,	· · · · · · · · · · · · · · · · · · ·	n may subject the person signing	this Statement to the penalties of 52 U.S.C. §30109 WITHIN 10 DAYS.

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

FEC FORM 1

(Revised 06/2012)

		orm 1 (Revised 02/2009)	Page 2
		COMMITTEE e Committee:	
	inuiuale	This committee is a principal campaign committee. (Complete the candidate information be	Now)
(a)	•	This committee is a principal campaign committee. (Complete the candidate information be	now.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (information below.)	Complete the candidate
	ne of ididate	Bobert Lee Manning Jr.	
	ididate	Office	State CA
ran	ty Affiliatio	ion I № D Sought: House Senate ✓ Preside	District 43
· (c)		This committee supports/opposes only one candidate, and is NOT an authorized committee	e.
	ne of ididate		
Par	rty Com	mmittee:	
(d)		(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Pol	litical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) It	s 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 separa committee. (i.e., nonconnected committee)	ite 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.)	
Joir	nt Fund	draising Representative:	•
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, at least one of which is an authorized committee of a federal candid	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, none of which is an authorized committee of a federal candidate.	
	Cam	nmittoes Participating in Joint Fundrainer	
	Com	nmittees Participating in Joint Fundraiser	
	1. ′	FEC ID number C	
	2.	FEC ID number C	
	3.	FEC ID number C	
	4		•

FEC Form 1 (Revise	d 02/2009)		Page 3
Write or Type Committee Na	me		
Robert Lee 1	lanning JR. For President	Ş	
	d Organization, Affiliated Committee, Joint Fundraising		or Leadership PAC Sponsor
J. 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
HrilleIndSI 1011	FI Plo Ible (HI luele Imalalatilalg	1 15TV 1 1	
Mailing Address	11401019 13011H HI AWHING	rne Bi	- v d - -
•	Haw thorne	CA	902501-7003
	CITY	STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee ' , Joint Fundra	using Representati	ve Leadership PAC Sponsor
Custodian of Records: le books and records.	dentify by name, address (phone number optional) and p	position of the pe	rson in possession of committee
Full Name Roll	seirit Lieie mainining Jip	<u> </u>	
Mailing Address	114029 South Hawthio		
·			
	Hawthorne		90250-
Title or Position	CITY	STATE	ZIP CODE
130014K1818161	€ √ 	number 2	(3-5,70-2518)
Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer on, assistant treasurer).	of the committee;	and the name and address of
Full Name of Treasurer	periti Leie mainning Jir.	 - - - 	
Mailing Address	140099 South Hawtho	orne Bu	LI VId
		<u> </u>	
	Hawthorne	L CA	90250-
Tidle or Decide	CITY	STATE	ZIP CODE
Title or Position	A Telephone	number 12.0	31-15701-2518

FEC Form 1 (Revise	d 0.2/2009)		Page 4	
T LO TOTH T (NEVISE	0 02/2003/		1 age 4	
Full Name of Designated Agent ROBE	21 rit liere mainning Ti	0.11111		
Mailing Address	1.41012191 SO WITH HAWTINDEN BLIVIO			
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	CITY	STATE	210 21510 - 7,0,0,3 ZIP CODE	
Title or Position TIVIEIQISIUIVIEVI	Teleph	none number 2	131-151201-25181	
Banks or Other Depositori safety deposit boxes or main Name of Bank, Depository, of	•	committee deposits	funds, holds accounts, rents	
Fide	with Investments			
Mailing Address	12-67.011 Hawthornes	BLIVE		
	Torriance	LA	905031-1111	
	CITY	STATE	ZIP CODE	
Name of Bank, Depository,	etc.		· · · · · · · · · · · · · · · · · · ·	
L		-1-1-1-1-1-1		
Mailing Address				
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·	CITY	STATE	ZIP CODE	

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WASHINGTON DC 20463

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EP14F July 2013

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PREPARER (3/2015)	DATE PREPARED