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. America Drafts Garcetti, Inc. 12601 Lomas Blvd. N.E. ADDRESS (number and street) Suite 42 (Check if address is changed) Albuquerque 87112 NM CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mikewebernm@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) americadraftsgarcetti.com (Check if address is changed) DATE 02 2018 C00667428 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. Weber, Michael, , , Type or Print Name of Treasurer Weber, Michael, , , [Electronically Filed] 01 2018 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

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	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
_	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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 Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name		
America Drafts	Garcetti, Inc.	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
NONE		
Mailing Address		
		I I-I
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representa	tive Leadership PAC Sponsor
 Custodian of Records: Identification books and records. 	ify by name, address (phone number optional) and position of the pe	erson in possession of committee
Weber, Mic	hael, , ,	
Full Name		
Mailing Address	Suite 42	
		07140
	Albuquerque	87112
Title or Position	CITY STATE	ZIP CODE
Chairman	Telephone number	505 4819
3. Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; ssistant treasurer).	and the name and address of
Full Name Weber, Mic	nael, , ,	
of Treasurer	12601 Lomas Blvd. N.E.	
Mailing Address		
	Suite 42	
	Albuquerque	87112
Title or Position	CITY STATE	ZIP CODE
Chairman	Telephone number	005 210 4819

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Full Name of Designated Agent Weber,	Michael, , ,				
Mailing Address	12601 Lomas Blvd. N.E.				
	Suite 42				
	Albuquerque	NM L ⁸	7112 		
Title or Position Chairman	Telepl	hone number 505			
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. Amalgamated Bank 2067 Bartow Avenue					
Mailing Address					
	Bronx	NY 1	0475		
	CITY	STATE	ZIP CODE		
Name of Bank, Depository	, etc.				
Mailing Address					
			1		