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FEC FORM

10030321548

STATEMENT OF ORGANIZATION

2010 MAY -4 AM 11: 04

FORM 1		ORGANIZ	ZAII	JN		Office Use Only
NAME OF COMMITTEE (ir	n full)	(Check if name is changed)		mple:If typing, type the lines.	12FE4M	
Mike V	Jashl	burn, for 1	Cong	4655	1, 1 1 1 1	
	1111		111	11111		
ADDRESS (number a	nd street)	(PO BOX 1	274	<u> </u>		
(Check if address is changed)		Boise	1 1 1		IIO	837011-
			СПҮ		STATE	ZIP CODE
COMMITTEE'S E-MA	VIL ADDRES	SS (Please provide only one		='		1
(Check if is change		MikeWashb	ugn Fi	Sr Congress	10 ya	hoo.com
COMMITTEE'S WEE (Check if is change	address	DRESS (URL) MIKEWAS!	nbur	n for Cong	<u>ręss.</u>	Com
2. DATE Ö	4 3	ů ž ò ľ ò				
3. FEC IDENTIFIC	CATION NU	JMBER C	P 0 (79055		
4. IS THIS STATE	MENT	NEW (N) OR	<u> </u>	AMENDED (A)		
I certify that I have	examined th	is Statement and to the bo	est of my	knowledge and belief i	t is true, com	ect and complete.
Type or Print Name	of Treasurer	, 3ill h)as	hburn		
Signature of Treasure	er <u></u>	John	/		Date 0	4 36 2010
NOTE: Submission of		ous, or incomplete information	-			to the penalties of 2 U.S.C. §437g.
Office Use				For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1

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TYPE OF C	OMMITTEE							
Candidate	ndidate Committee:							
(a) X	This committee is a principal campai	ign committee. (Comp	lete the candidate infor	mation below.)				
(b)	This committee is an authorized con information below.)	nmittee, and is NOT a	principal campaign co	mmittee. (Complete the candidate				
Name of Candidate	Michael Jan	mes, Wa	shbum					
Candidate Party Affiliati	on Lib Office Sought:	X House	Senate	President State II				
(c)	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.							
Name of Candidate								
Party Con	nmittee:	/National State		(Domocratic				
(d)	This committee is a	(National, State or subordinate) c	ommittee of the	(Democratic, Republican, etc.) Party.				
Political A	ction Committee (PAC):							
(e)	This committee is a separate segreg	ated fund. (Identify co	nnected organization or	n line 6.) Its connected organization is				
	Corporation	Corpor	ation w/o Capital Stock	Labor Organization				
	Membership Organization	Trade /	Association	Cooperative				
	In addition, this comm	ittee is a Lobbyist/Reg	istrant PAC.					
(f)	This committee supports/opposes macommittee. (i.e., nonconnected commit		candidate, and is NOT	a separate segregated fund or party				
	In addition, this committee is a	a Lobbyist/Registrant F	AC.					
	In addition, this committee is a	a Leadership PAC. (Ide	entify sponsor on line 6.)					
Joint Fund	raising Representative:							
(g)	This committee collects contributions, committees/organizations, at least one							
(h)	This committee collects contributions,							
	committees/organizations, none of whi	ich is an authorized co	minice or a reactal car					
Com	committees/organizations, none of whit mittees Participating in Joint Fund		or a receive ter					
Com	,		FEC ID numb	_				
	,			per C				
1.	,		FEC ID numb	per C				

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_	Write or Type Committee		rage 3
_			
6.	Name of Any Conn	nected Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
L			
L			
	Mailing Address		
		CITY STATE	ZIP CODE
	Relationship: Co	onnected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
7.	books and records.	ds: Identify by name, address (phone number – optional) and position of the person in	possession of committee
	Full Name		
	Mailing Address	PO BOX 1276	
			
		Boise B	3.7.0.11-
	Title or Position	CITY STATE	ZIP CODE
	Custodia	Telephone number	ــــا-لـــــ
8.		ame and address (phone number - optional) of the treasurer of the committee; and the (e.g., assistant treasurer).	e name and address of
	Full Name of Treasurer	Jill Washburn	
	Mailing Address	PO BOX 1276	
		BOUSE CITY STATE	3, 7,0,11-L
	Title or Position		. , , _ , , ,

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Full Name of Designated Agent			
Mailing Address		1111	
	спу	STATE	ZIP CODE
Title or Position	Telephone n	umber <u>i</u>	
Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository,		nittee deposits	funds, holds accounts, rents
Kly Mailing Address	Bank 1702 W. Idaho St.	1 1 1 1	
	Brise	FD	1837021-
	СПҮ	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
ليليا			
Mailing Address	<u> </u>		
		لــا	لـــا-لــــا
	СПУ	STATE	ZIP CODE

(3/2005)

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