PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 × COMMITTEE (in full) is changed) over the lines. Brown for Congress Committee PO BOX 335 ADDRESS (number and street) (Check if address is changed) **FLOURTOWN** 19031 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS lissa1011@gmail.com (Check if address is changed) Optional Second E-Mail Address alex.barna.cpa@comcast.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2002 C00346668 FEC IDENTIFICATION NUMBER > 3. X 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. ALEX BARNA Type or Print Name of Treasurer ALEX BARNA [Electronically Filed] 07 15 2013 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

Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

| | FEC Fo | orm 1 (Revised 02/2009) Page 2 | |
|-------------|----------------|--|----|
| TYP | E OF C | COMMITTEE | _ |
| Car | ndidate | 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. (Complete the candidate information below.) | |
| Nam Cand | e of didate | MELISSA M M BROWN | |
| | didate | Office State REP Sought: X House Senate President | |
| Party | ty Affiliatio | ion REP Sought: X House Senate President District | |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Nam Cand | e of didate | | _ |
| Par | ty Con | mmittee: | |
| (d) | | (National, State (Democratic, Republican, etc.) Part | y. |
| Poli | tical A | 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 part committee. (i.e., nonconnected committee) | y |
| | | In addition, this committee is a Lobbyist/Registrant PAC. | |
| | | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | |
| Join | t Func | draising 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. | |
| | Com | nmittees Participating in Joint Fundraiser | |
| | 1. | FEC ID number | |
| | 2. | FEC ID number | |
| | 3. | | |
| | 4. | | ĺ |

| FEC Form 1 (Revise | ed 02/2009) | Page 3 |
|---|--|------------------------------|
| Write or Type Committee Na | ame | |
| Brown for Cor | ngress Committee | |
| 6. Name of Any Connected | d Organization, Affiliated Committee, Joint Fundraising Representative, or Lo | eadership PAC Sponsor |
| NONE | | |
| | | |
| Mailian Address | | |
| Mailing Address | | |
| | | |
| | CITY STATE | ZIP CODE |
| Deletionskin, German | | |
| Relationship: Connec | cted Organization Affiliated Committee Joint Fundraising Representative | Leadership PAC Sponsor |
| . Custodian of Records: lo books and records. | dentify by name, address (phone number optional) and position of the person | ı in possession of committee |
| 1 | | 1 |
| Full Name | | |
| Mailing Address | | |
| | | |
| | | |
| Title or Position | CITY STATE | ZIP CODE |
| | Telephone number |] |
| B. Treasurer: List the name any designated agent (e.g | and address (phone number optional) of the treasurer of the committee; and g., assistant treasurer). | the name and address of |
| Full Name ALEX B | BARNA | 1 |
| of Treasurer | 270 S Woodmont Dr | |
| Mailing Address | | |
| | Downingtown | 9335 |
| | CITY | ZIP CODE |
| Title or Position Treasurer | Telephone number 610 | 8215 |

| FEC Form 1 (R | Revised 02/2009) | Page 4 |
|--|--|-----------------------------|
| | | |
| Full Name of Designated Agent | | |
| Mailing Address | | |
| | | |
| | CITY STATE | ZIP CODE |
| Title or Position | | |
| | Telephone number | |
| | sitories: List all banks or other depositories in which the committee deposits for maintains funds. | unds, holds accounts, rents |
| safety deposit boxes or Name of Bank, Deposit | r maintains funds. | unds, holds accounts, rents |
| safety deposit boxes or Name of Bank, Deposi | r maintains funds. itory, etc. | unds, holds accounts, rents |
| safety deposit boxes or Name of Bank, Deposit | r maintains funds. itory, etc. | unds, holds accounts, rents |
| safety deposit boxes or Name of Bank, Deposit | r maintains funds. itory, etc. IC Bank PO Box 535230 | |
| safety deposit boxes or Name of Bank, Deposit PN Mailing Address | r maintains funds. itory, etc. IC Bank PO Box 535230 Pittsburg PITTS PA STATE | 15253-5230 |
| safety deposit boxes or Name of Bank, Deposit PN Mailing Address | r maintains funds. itory, etc. IC Bank PO Box 535230 Pittsburg PITTS PA STATE | 15253-5230 1 |
| Safety deposit boxes or Name of Bank, Deposit PN Mailing Address Name of Bank, Deposit | r maintains funds. itory, etc. IC Bank PO Box 535230 Pittsburg PITTS PA STATE | 15253-5230 1 |
| Safety deposit boxes or Name of Bank, Deposit PN Mailing Address Name of Bank, Deposit | r maintains funds. itory, etc. IC Bank PO Box 535230 Pittsburg PITTS PA STATE | 15253-5230 |
| safety deposit boxes or Name of Bank, Deposit | r maintains funds. itory, etc. IC Bank PO Box 535230 Pittsburg PITTS PA STATE | 15253-5230 1 |