## 2018 - 02 - 12 - 0M - 00195576

**FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

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2018FEB 12 AM 10: 23

NAME OF     COMMITTEE (in full)	(Check if na is changed)	me Example: If typing, type over the lines.	12FE4M5			
COLLTION FOR	RIGONGRE	55 <u>5                                    </u>	<u> </u>			
ADDRESS (number and street)	4.755 PAR	KIORIIII				
☐ ◀ (Check if address is changed)						
	SHEFFIEL CITY A	D LAKE III	O  H   4  4  O  5  STATE ▲ Z	4 - LIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		
COMMITTEE'S E-MAIL ADDRE	SS					
(Check if address is changed) [COLTON FOR CONCRESSO GMA (L. SOM)						
	Optional Second E-I	Mail Address	<del>                                     </del>			
COMMITTEE'S WEB PAGE ADD  (Check if address is changed)	DRESS (URL) NO7	SETUP	<u> </u>			
2. DATE 02 0	4 2018		,			
3. FEC-IDENTIFICATION N	UMBER -▶	C	HAUE NOT RECIE	UED		
4. IS THIS STATEMENT X	NEW (N)	OR AMENDED (A	·)	· 		
I certify that I have examined the	his Statement and to t	he best of my knowledge and beli	ef it is true, correct and complete	te.		
Type or Print Name of Treasure	KEITH	COLTON				
Signature of Treasurer	Kell	) (lu)	Date 02 004/	, 2018		
NOTE: Submission of false, erron		ormation may subject the person sign		of 2 U.S.C. §437g.		
Office Use Only		For further informati Federal Election Com Toll Free 800-424-953	mission	FORM 1 ed 06/2012)		

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

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		OMMITTEE Committee:				
(a)	didate	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 Cand		KEITH COGTON				
Cand Party	idate Affiliatio	on REP Office Sought: House Senate President	State OH District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name						
Part	y Con	nmittee:  (National, State	Democratic,			
(d)			Republican, etc.) Party			
Poli	tical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	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.				
<b>(f)</b>		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or pacommittee. (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.)				
Join	t Func	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 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 C				
	2.	FEC ID number C				
	3.	FEC ID number C				
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	C Form 1 (Revised		raye 3
6. Name	of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
NONE			
Mailing	Address		
		CITY STATE	ZIP CODE
Relation	nship: Connecte	ed Organization Affiliated Committee DJoint Fundraising Representative	Leadership PAC Sponsor
	lian of Records: Ide and records.	entify by name, address (phone number optional) and position of the person i	n possession of committee
Full Na	me KFi	THE COLTON	
Mailing	Address	14755 PARK DR.	
		SHEFFIELD LAKE 1111 OF G	40541-
Title or	Position	CITY STATE	ZIP CODE
178	REASONE	Telephone number 2.16	-1538-1608
		nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	ne name and address of
Full Na of Treas	me surer 【 <u>人</u> 斥人	7H.CO4700	
Mailing	Address	147B5 PARK DRISHEFFIELD LAKE	
			40541-
Title or	Position	CITY STATE	ZIP CODE
TIR	EASURE	Telephone number 216	- 1538 - 160 <i>6</i> 8

CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 02/2009)

Full Name of

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CONCRETS

DR,

C MX所 COLTON FOR 4765 PARK SHEFFIELD

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Date of Receipt  Received from Senate Public Records Office					
Received from Electronic I	Filing Office	Date of Receipt			
Other (Specify):		Date of Receipt or Postmarked			
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(3/2015)		DATE PREPARED			
(0/2010)		•			