•		RECEIVED			
FEC FORM 1	STATEMENT OF ORGANIZATION	2012 FEB - 3 PM 12: 05 FEC MAIL CENTER Office Use Only			
1. NAME OF COMMITTEE (in full)	(Check If name Example: If typing, type is changed) over the lines.	12FE4M5			
Chris Reilly	2012				
ADDRESS (number and stre	PO Box 108				
(Check if address is changed)	s York	PA 1.7.4.0.5-			
	CITY	STATE ZIP CODE			
COMMITTEE'S E-MAIL AD (Check if addre is changed)	DDRESS (Please provide only one e-mail address) chrisreilly2012@comcast.r				
COMMITTEE'S WEB PAG	www.chrisreilly2012.com				
2. DATE	0 ñ / Y Y Y Y				
3. FEC IDENTIFICATIC					
4. IS THIS STATEMENT					
-	ned this Statement and to the best of my knowledge and belief it asurer Matt Falvey	is true, correct and complete.			
Type or Print Name of Tre Signature of Treasurer	Matthew & Delvey	Date 0 1 2 6 2 0 1 2			
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 Use Only	For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100				

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FEC Form 1 (Revised 02/2009)

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5.	TYPE	TYPE OF COMMITTEE				
	Candidate Committee:					
	(a)	\times	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 Candi		Chris Reilly			
	Candi Party	date Affiliatio	n REP Office Sought: House Senate President State PA District 04			
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name Candi	-				
	Part	y Com	mittee:			
	(d)		This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.			
	Polit	ical Ad	ction 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			
			Membership Organization Trade Association Cooperative			
			In addition, this committee is a Lobbyist/Registrant PAC.			
	(1)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (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.)			
	Joint	Fund	raising 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.			
		Comr	nittees Participating in Joint Fundraiser			
		1.				
		2.	ten ten den algenden den den den den den den den den de			
		3.				
		4.	FEC ID number			
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Write or Type Committee Name

Chris Reilly 2012

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship:	ted Organization	Joint Fundraising Representativ	ve Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name	tt Falvey			1 1 1 1 1 1
Mailing Address	30 Hudson Dr	<u>,]] i i .</u>		<u> </u>
		<u></u>		
		<u> </u>	A 1740	2
Title or Position	CITY	STAT	re :	ZIP CODE
Treasurer		Telephone number	[717 ,] – [7 4	75427

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Matt Falvey		
Mailing Address	30 Hudson Dr	<u> </u>	
	York		17402
Title or Position	CITY	STATE	ZIP CODE
Treasurer	1	lephone number 71	7, 747, 5427, _

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Full Name of Designated Agent	Karen Falvey					
Mailing Address		30 Hudson Dr				
			PA J STATE	17402		
Title or Position	Treasu			7, - 747, - 5427,		
Banks or Other safety deposit bo Name of Bank, I	oxes or main		nittee deposits	funds, holds accounts, rents		
	Metro		<u>Ii</u>			
Mailing Address		2160 Queen St	<u>i 1</u>			
			<u> </u>			
		York	PAI	17402 -		
		CITY	STATE	ZIP CODE		
Name of Bank, I	Depository, e	atc.		····		
			<u></u>			
Mailing Address		·				
		CITY	STATE	ZIP CODE		

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation [™] or Signature Confir	rmation [™] Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify): fect Eff	Shipping Date
Next Busines	ss Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Date of F	Receipt or Postmarked
Amis	2/3/12
PREPARER (3/2005)	DATE PREPARED