

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2011 DEC -5 AM 10:59

Office Use Only FEC MAIL CENTER

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

THE NEW NATIONALIST PARTY

ADDRESS (number and street)

8033 W SUNSET BLVD

(Check if address is changed)

#241

LOS ANGELES CA 90046

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

OLEARYC@GEORGETOWN.EDU

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

HTTPS://SITES-GOOGLE.COM/SITE/DRCORNELIUSOLEARY/

2. DATE

11/23/2011

3. FEC IDENTIFICATION NUMBER

C

4. 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.

Type or Print Name of Treasurer

CORNELIUS O'LEARY JR MD

Signature of Treasurer

Cornelius O'Leary Jr MD

Date

11/23/2011

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 contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

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5. TYPE OF COMMITTEE

Candidate 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.)

Name of Candidate CORNELIUS JOSEPH O'LEARY JR MD

Candidate Party Affiliation NNP Office Sought: PRESIDENT House Senate President State CA District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political 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 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 Fundraising 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.

Committees Participating in Joint Fundraiser

1.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

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Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative 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

CORNELIUS JOSEPH O'LEARY JR MD

Mailing Address

8033 W SUNSET BLVD
#241
LOS ANGELES

CA

90046

Title or Position

CITY

STATE

ZIP CODE

CANDIDATE / CUSTODIAN OF RECORDS

Telephone number

310-963-7982

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

CORNELIUS JOSEPH O'LEARY JR MD

Mailing Address

8033 W SUNSET BLVD
#241
LOS ANGELES

CA

90046

Title or Position

CITY

STATE

ZIP CODE

CANDIDATE / TREASURER

Telephone number

310-963-7982

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Full Name of Designated Agent

CORNELIUS JOSEPH O'LEARY JR MD

Mailing Address

8033 W. SUNSET BLVD

AZLI

LOS ANGELES

CA

90046

CITY

STATE

ZIP CODE

Title or Position

CANDIDATE

Telephone number

310-986-7982

9. 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.

BANK OF AMERICA

Mailing Address

6300 SUNSET BLVD

HOLLYWOOD

CA

90046

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

11030692196

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

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No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business 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

Other (Specify): Date of Receipt or Postmarked

[Signature]
PREPARER
(3/2005)

12/5/11
DATE PREPARED

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