Image# 15950626593				02/19/2015 12 : 01
			1	PAGE 1 / 4
FEC	STATEME	NT OF		
FORM 1	ORGANIZ	ATION		
				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
	is changed)	over the lines.		
ADDRESS (number and street)	PO Box 3071			
(Check if address				
is changed)	Albuquerque		NM87	/190
			STATE	
	-			
COMMITTEE'S E-MAIL ADDRE	;ss ,jillriester@gmail.com			
 (Check if address is changed) 				
	Optional Second E-Mail Ad maggiepac.nm@gm	dress ail com		1
	maggiepacininegin			
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
 (Check if address is changed) 				
	1			
	D / Y Y Y Y			
2. DATE 02 12	2 2015			
3. FEC IDENTIFICATION N		00572909		
3. FEG IDENTIFICATION IN				
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
	in Otatomant and to the last	of my looped almost of the P. C.	ie true	d complete
I certify that I have examined the	is statement and to the best	or my knowledge and belief it	is true, correct an	la complete.
Type or Print Name of Treasure	r Jill Riester			
			M	/ D D / Y Y Y Y
Signature of Treasurer	iester	[Electronically Filed]	Date 02	19 2015
NOTE: Submission of false, erron	eous, or incomplete information	may subject the person signing t	his Statement to the	e penalties of 2 U.S.C. §437g.
		ON SHOULD BE REPORTED W		
Office Use		For further information co Federal Election Commission		FEC FORM 1 (Revised 06/2012)
Only		Toll Free 800-424-9530 Local 202-694-1100		(I IEVISEU UU/2012)

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I	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Can	ndidate	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. (Com information below.)	plete the candidate
Nam Canc	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of didate		
Part	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	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.	
(f)	\times	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
		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	raising 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 tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	EC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

MaggiePAC

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

Mailing Address																																	
																								L						- L			
									CI	TΥ										S	TAT	E					Z	IP	СО	DE	-		
Relationship: Co	nnec	ted	Org	ganiz	atic	on	Aff	iliat	ted	Cor	mm	itte	e	Joi	nt F	- un	ıdra	isir	ng F	Seb	ores	ser	ntat	ve	C	L	ead	ers	ship	PA	IC S	Spo	nsor

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

Jill Riester	
Full Name	
Mailing Address	P.O. Box 548
	Sandia Park NM 87047
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 505 321 9725

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	Jill Riester
Mailing Address	P.O. Box 548
	Sandia Park NM 87047 –
Title or Position	CITY STATE ZIP CODE

Full Name of Designated Agent	Danika Padilla		
Mailing Address	1512 Gold Ave SE, Apt A		
	Albuquerque	NM 87106	
	CITY	STATE	ZIP CODE
Title or Position			

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.

L	JS New Mexico Federal Credit Union	
Mailing Address	P.O. Box 129	
	Albuquerque	NM87103
	CITY	STATE ZIP CODE
Name of Bank, Dep	ository, etc.	
L		
Mailing Address		
	CITY	STATE ZIP CODE