FEC	•
FORM	

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STATEMENT OF 2008 APR 22 AM 9: 14 **ORGANIZATION** Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. ELECT HODREN IN LUCIER IFIARI ICIDINIGIRIESS ADDRESS (number and street) (Check if address is changed) CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS COMMITTEE'S WEB PAGE ADDRESS (URL) WWW AWDIRITIAM ILLICITA OIUSI COMMITTEE'S FAX NUMBER 14.431-15.831-10070 DATE **FEC IDENTIFICATION NUMBER** AMENDED (A) IS THIS STATEMENT OR NEW (N) 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 Signature of Treasurer 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 Toil Free 800-424-9530 Local 202-694-1100 (Revised 12/2007) Only

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,	FEC F	orm 1 (Revised 12/2007) Pag	 je 2	'	
		COMMITTEE			
C		te Committee:	ĺ		
(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 c information below.)	andidate	9	
	ame of andidate	A.W.D. RETA MILLIER	<u></u>		
	andidate arty Affilia	tion DEM Office State House D Senate President District	a [ş	/A 04	
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		ı	
	ame of andidate				
P	arty Co	mmittee:			
(d)	. 0	This committee is a (National, State (Democration of the Republican Republica		³arty.	
P	oliticai	Action Committee (PAC):			
(e)) []	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	anizatio	n is a	
		Corporation Corporation w/o Capital Stock Labor Or	ganizați	ion	
		Membership Organization Trade Association Cooperat	tive		
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated for committee. (i.e., nonconnected committee)	und or	party.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Jo	int Fur	draising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, at least one of which is an authorized committee of a federal candidate.	political		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	political	•	
Committees Participating in Joint Fundraiser					
	1.	FEC ID number	~~		
	2.		~~~		
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	3.		<u>~~</u>	~	
	4.	FEC ID number	_		
	5.	FEC ID number	<u>, </u>		

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FEC Form 1 (Revised 12/2007) P	ge 3	
Write or Type Committee Name		
6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundralsing Representations of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundralsing Representations of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundralsing Representations of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundralsing Representations of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundralsing Representations of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundralsing Representation of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundralsing Representation of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundralsing Representation of Any Connected Organization (Angel Angel An	sentativ	ve .
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Mailing Address		Ш
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CITY STATE ZIP C	DDE	·
Relationship:	l	
Connected Organization Affiliated Committee Leadership PAC Sponsor Joint Fundraising Rep	resentati	ive
 Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession books and records. 	of com	ımittee
Full Name RILICIHIAIRIDI ILI SIUMWFIRI	<u> </u>	لبب
Mailing Address 14004 SUMMERSEDGE TERRACE		لب
	-1-1	أحب
CHESTIGREVELD VA 23832	<u> </u>	
CITY STATE ZIP C	DE	
Title or Position		
TIRIEANSIURIER Telephone number PIO41-1608	-1414	96
 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and any designated agent (e.g., assistant treasurer). 	addres	s of
Full Name of Treasurer RILICIHIAIRIDI		لحب
Mailing Address 1/14010141 ISI CAMIMIER SIEDBEL ITEIRIRIACELLI	 -	لـــــا
		لــــا
CHEST ERIFLE LD LL VAI B3832	لياح	لــــا
CITY STATE ZIP CO	DE	
TRIEIASIORIER Telephone number 8:04-6:08	- كياً	96
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FEC Form	1 (Revised 12/2007)		Pag	4	
Full Name of Designated Agent	<u> </u>				_
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	СПУ	STATE	ZIP CODE		,
Title or Position	1		1-1 1-1		1
	Telephone nu	mber []	┸┸┸┸┸ ^{┩╼} ┺┸┸┸ ┃	111	J
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safety deposit be	Depositories: List all banks or other depositories in which the commit was or maintains funds.	tee deposits	funds, holds accounts,	rents	•
Name of Bank, I	Depository, etc.				
	WACHOULA BANKILLI	1.1.1.			١
Mailing Address	1/3,505, HARBOUR POINT	ELPA	RIKIWAIYLI		Ŀ
		<u> </u>		<u> </u>	l
	MILIDIA DITIHUAWI	V.Al	231121-1		
	CITY	STATE	ZIP CODE		
Name of Bank,		~			-
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Mailing Address		 			L
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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 recei	ved.
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