

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

Rontel for Florida

ADDRESS (number and street)

607 Cathedral Place

(Check if address is changed)

St. Augustine

CITY ▲

FL

STATE ▲

32084

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

ron.batie@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

06 / 25 / 2018

3. FEC IDENTIFICATION NUMBER ►

C 00655118

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

Rontel Batie

Signature of Treasurer

Date

06 / 25 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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 06/2012)

NOTICE OF NON-CONFIDENTIALITY



Write or Type Committee Name

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

[Empty grid lines for Name of Any Connected Organization]

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

Rontel Batie

Mailing Address

607 Cathedral Place

St. Augustine

FL

32084

Title or Position

CITY

STATE

ZIP CODE

Candidate

Telephone number

904

392

7689

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

Rontel Batie

Mailing Address

607 Cathedral Place

St. Augustine

FL

32084

Title or Position

CITY

STATE

ZIP CODE

Candidate

Telephone number

904

392

7689

NOT FOR FILING







Federal Election Commission  
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