FEC FORM 1	STATEMEN ORGANIZA		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
	LI BHUIYAN FOR	CONGRESS	
	2900 DELK ROAD SUITE 700	) #25	
ADDRESS (number and street) (Check if address is changed)			GA 30067 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDR	ESS		
<ul> <li>(Check if address is changed)</li> </ul>	MOHAMMADALIFORC	ONGRESS@GMAIL.COM	<b>/</b>
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)		
2. DATE 03	17 / Y Y Y Y 2017		
3. FEC IDENTIFICATION N	NUMBER ► C co	00633529	
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 Treasu	er Bhuiyan, Mohammad, , ,		
Signature of Treasurer	iyan, Mohammad, , ,	[Electronically Filed]	Date 03 / D D / Y Y Y Y 2017
NOTE: Submission of false, erro		may subject the person signing t DN SHOULD BE REPORTED W	his Statement to the penalties of 2 U.S.C. §437g. ITHIN 10 DAYS.
Office Use Only		For further information cc Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

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			OMMITTEE	
	Cand	lidate	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 Candio		Bhuiyan, Mohammad, , ,	
	Candic Party	date Affiliatio	on Rep Office Sought: K House Senate President District 06	=
	(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candic			
	Party	/ Com	nmittee:	
	(d)		This committee is a       (National, State or subordinate) committee of the       (Democratic, Republican, etc.) Par	ty.
	Politi	cal A	ction Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is	s 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 par committee. (i.e., nonconnected committee)	ty
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint	Fund	Iraising 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.	
		Com	mittees Participating in Joint Fundraiser	
		1.		٦
		2.	FEC ID number	
		3.	FEC ID number	٦
		4.		ī

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Write or Type Committee Name

## MOHAMMAD ALI BHUIYAN FOR CONGRESS

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

NONE		
Mailing Address		
	CITY	STATE ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraisin	g 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.

Bhuiyan, M	Iohammad, , ,
Full Name	
Mailing Address	2900 Delk Road
	Suite 700 #25
	Marietta GA 30067
Title or Position	CITY STATE ZIP CODE
Treasurer/Candidate	Telephone number 404 441 7881

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	Bhuiyan, Mohammad, , ,
Mailing Address	2900 Delk Road
	Suite 700 #25
	Marietta
	CITY STATE ZIP CODE
Title or Position Treasurer/Candida	ate

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Full Name of Designated Agent								I	I																					
Mailing Address																														
																							L							
							СІЛ	ΓY											STA	ΤE					ZII	PC	COD	Ε		
Title or Position																														
														Tele	eph	ione	e ni	umt	ber											

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.

Wells F	Fargo		
Mailing Address	Cunberland Blvd Branch		
	Atlanta	GA 30	0339
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE