Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Mindy Robinson for Congress 4055 W. Sunset Road ADDRESS (number and street) (Check if address is changed) Las Vegas 89118 NV CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mindyrobinsonforcongress@gmail.com (Check if address is changed) Optional Second E-Mail Address iheartmindy@yahoo.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.mindyrobinsonforcongress.com (Check if address is changed) DATE 2020 C00742155 FEC IDENTIFICATION NUMBER 3. X 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. Robinson, Melinda, , , Type or Print Name of Treasurer Robinson, Melinda, , , [Electronically Filed] 03 2020 Signature of Treasurer Date 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 (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

F	EC Fo	rm 1 (Revised 02/2009)	Page 2				
		OMMITTEE					
(a)	x	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 Cand		Robinson, Mindy, , ,					
	lidate Affiliati	on REP Office Sought: * House Senate President	State NV District 03				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand							
Part	y Con	nmittee: (National, State	Democratic,				
(d)			Republican, etc.) Party.				
Poli	tical A	ction 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.)					
Join	t Fund	Iraising 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 two 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.	FEC ID number C					
	4						

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Write or Type Committee N		i aye v
	son for Congress	
	ted Organization, Affiliated Committee, Joint Fundraising Represen	ntative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STA	ATE ZIP CODE
Relationship: Conn	ected Organization Affiliated Committee Joint Fundraising Repr	resentative Leadership PAC Sponsor
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of	f the person in possession of committee
I	nson, Melinda, , ,	
Full Name	4055 W. Sunset Road	
Mailing Address		
	Las Vegas , N	V , 89118
Title or Position	CITY STAT	TE ZIP CODE
	Telephone number	760 - 819 - 2138
3. Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of the compact.g., assistant treasurer).	mittee; and the name and address of
	son, Melinda, , ,	
of Treasurer	4055 W. Sunset Road	
Mailing Address		
	LI on Vogen	N/ 1 190449 · · ·
	Las Vegas N	V 89118 -
Title or Position	CITT STAT	760 819 2138
	Telephone number	100 - 019 - 2130

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Full Name of			
Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Telephone n	umber	
Mailing Address	Bank of America 4840 W. Cactus Ave Las Vegas	NV	89141
	CITY	STATE	ZIP CODE
Name of Bank, D	epository, etc.		
Mailing Address			
	T.		