Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Defend the Righteous PAC P.O. Box 270463 ADDRESS (number and street) (Check if address is changed) West Hartford 06127 CT CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS defendtherighteous2018@gmail.com (Check if address is changed) Optional Second E-Mail Address arnold@ctcomplianceandlaw.com COMMITTEE'S WEB PAGE ADDRESS (URL) defendtherighteous.org (Check if address is changed) DATE 2018 C00674044 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. Stoudt, Hilary, , , Type or Print Name of Treasurer Stoudt, Hilary,,, [Electronically Filed] 03 2018 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

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected 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.	
(5)		_	areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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	
	4.		

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Write or Type Committee Na	ame	
Defend the Ri	ghteous PAC	
	d Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
<u> </u>		
Mailing Address		
	CITY	7ID CODE
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: I books and records.	Identify by name, address (phone number optional) and position of the person	on in possession of committee
	, Hilary, , ,	
Full Name		
Mailing Address	P.O. Box 270463	
	West Hartford CT	06127
Title or Position	CITY STATE	ZIP CODE
Treasurer	860 Telephone number	
Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and g., assistant treasurer).	d the name and address of
Full Name Stoudt, of Treasurer	Hilary, , ,	
Mailing Address	P.O. Box 270463	
	West Hartford	06127
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 860	

1 E Ø 1 Ø 11	n 1 (Revised 02/2009)	Page 4
Full Name of Designated	Skretta, Esq, Arnold, , , .	
Agent	D.O. Davi 400	
Mailing Address	P.O. Box 130	
	Guilford CT 06437	. [-]
	CITY STATE Z	IP CODE
Title or Position Counsel/Agent		33 - 7171
Banks or Other	Depositories: List all banks or other depositories in which the committee deposits funds, holds	accounts, ronts
Name of Bank, [oxes or maintains funds. Depository, etc.	
	Depository, etc.	
	Depository, etc. People's United Bank	
	Depository, etc.	
Name of Bank, [Depository, etc. People's United Bank	
Name of Bank, [Depository, etc. People's United Bank	
Name of Bank, [People's United Bank 850 Main Street Bridgeport CT 06604	IIP CODE
Name of Bank, [People's United Bank 850 Main Street Bridgeport CITY STATE Z	IP CODE
Name of Bank, I	People's United Bank 850 Main Street Bridgeport CITY STATE Z	IP CODE
Name of Bank, I	Depository, etc. People's United Bank 850 Main Street Bridgeport CITY STATE Z Depository, etc.	IIP CODE
Name of Bank, [Mailing Address Name of Bank, [Depository, etc. People's United Bank 850 Main Street Bridgeport CITY STATE Z Depository, etc.	IP CODE
Name of Bank, [Mailing Address Name of Bank, [Depository, etc. People's United Bank 850 Main Street Bridgeport CITY STATE Z Depository, etc.	