

FEC FORM 1

STATEMENT OF ORGANIZATION

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FEC MAIL CENTER

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1. NAME OF COMMITTEE (in full)



(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

MARK WICHERN FOR US CONGRESS INC

ADDRESS (number and street)

1160 MY WAY



(Check if address is changed)

SANTA ROSA BEACH

FL

325491

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address is changed)

LWICHERN@WICHERNFORCONGRESS.COM

Optional Second E-Mail Address

DEBRAH4AU@GMAIL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address is changed)

WICHERNFORCONGRESS.COM

2. DATE

07 / 15 / 2016

3. FEC IDENTIFICATION NUMBER ▶

C00558569

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

Debra S. Henry

Signature of Treasurer

Debra S Henry

Date

07 / 15 / 2016

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)

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5. TYPE OF COMMITTEE

Candidate 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 of Candidate MARK W. CHERN

Candidate Party Affiliation REP Office Sought: House Senate President State FL District 01

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action 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.)

Joint Fundraising 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.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____
2.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____
3.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____
4.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____

2019-07-20 09:00:00 888874

Write or Type Committee Name

MARK WICHERN FOR US CONGRESS INC

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

[Empty grid lines for organization name]

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

DEBRA HENRY

Mailing Address

11257 DEERWOOD DRIVE

MIRAMAR BEACH

FL

32550

Title, or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

850-687-4461

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

DEBRA HENRY

Mailing Address

11257 DEERWOOD DRIVE

MIRAMAR BEACH

FL

32550

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

850-687-4461

2016-07-20 01:00:00

TY®
★

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TO: Federal Election Commission
999 E Street, NW
WASHINGTON, DC 20463



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Federal Election Commission
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 PREPARER
7/20/16
DATE PREPARED

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