Image# 201509229002774698			_	PAGE 1/4
FEC FORM 1	STATEMEN ORGANIZ			
			Offic	ce Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Happy Laughters	son's Merry Band	of Unicorns for	Stentor Dar	nielson
ADDRESS (number and street)	1227 Veto St #2			
(Check if address is changed)				
is changed)	Pittsburgh		PA 1521	2
			STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	ESS			
Check if address	stentor.danielson@gm	ail.com		
is changed)	Optional Second E Mail Adv	droop		
	Optional Second E-Mail Add			
				<u> </u>
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DDRESS (URL)			
	26 / Y Y Y Y 2015			
3. FEC IDENTIFICATION N	IUMBER ► C C	00585117		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined t	this Statement and to the best	of my knowledge and belief in	t is true, correct and o	complete.
Type or Print Name of Treasure	er Christina Powers			
Signature of Treasurer	istina Powers	[Electronically Filed]	Date 09	22 / Y Y Y Y 2015
NOTE: Submission of false, error		may subject the person signing ON SHOULD BE REPORTED V		enalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	ion F	FEC FORM 1 (Revised 06/2012)

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	FEC Fo	rm 1 (Revised 02/2009) Page 2
TYP	E OF C	OMMITTEE
Car	ndidate	e 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.)
Nam Cano	ne of didate	Stentor Danielson
	didate y Affiliati	on Office Sought: House Senate X President District
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Nam Cano	ne of didate	
Par	ty Con	nmittee:
(d)		This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.
Poli	itical 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	nt Fund	raising 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. 2.	
	3.	FEC ID number
	4.	FEC ID number

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Happy Laughterson's Merry Band of Unicorns for Stentor Danielson

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

N					
	Mailing Address				
		CITY		STATE	ZIP CODE
	Relationship: Connected	Organization Affiliated Comm	ittee	g Representative	Leadership PAC Sponsor
7.	Custodian of Records: Iden books and records.	ify by name, address (phone nur	nber optional) and posi	tion of the person in p	possession of committee
	Christina P	owers			
	Mailing Address	1227 Veto St #2			
	5				
		Pittsburgh		PA 15212	2
	Title or Position	CITY		STATE	ZIP CODE
			Telephone nu	mber	
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optionssistant treasurer).	nal) of the treasurer of the	e committee; and the	name and address of
	Full Name Christina Po)wers			

Fuil Name	500013																							1
of Treasurer																								
Mailing Address	1227	/eto St	t #2																					
	Pittsb	urgh												L	PA		15	5212						
					CIT	Y								ST	ATE	-			Z	ZIP	COI	DE		
Title or Position																								
			<u> </u>						٦	Fele	pho	ne	nur	nbe	r] – [
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Full Name of Designated Agent	Cheyenne Wall-Grimes
Mailing Address	11406 Clifton Blvd. #508
	Cleveland OH 44102
	CITY STATE ZIP CODE
Title or Position	
	Telephone number

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 o	f Bank,	Depository,	etc.
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SRU F			
Mailing Address	235 Grove City Road		
	Slippery Rock		16057
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE