

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Citizens to Elect Rosie 4 Congress

ADDRESS (number and street)

(Check if address
is changed)

P.O. Box 1322

Nu'uanu

Pago Pago

CITY ▲

AS
STATE ▲

967996295
ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

rosielancaster@ymail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

2. DATE

04 18 2014

3. FEC IDENTIFICATION NUMBER ►

C

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

David M. Lancaster

Signature of Treasurer

David M. Lancaster

Date

04 18 2014

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
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Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

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

ROSIE TAGO LANCASTER

Candidate
Party Affiliation

IND

Office
Sought:☒

House

☐

Senate

☐

President

State

AS

District

AS

(Independent)

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

Name of
Candidate**Party Committee:**

Local

(d) ☒

This committee is a

LOC

(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 Fundraiser1. FEC ID number C2. FEC ID number C3. FEC ID number C4. FEC ID number C

Write or Type Committee Name

CITIZENS TO Elect Rosie & Congress

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

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

DAVID MICHAEL LANCASTER

Mailing Address

P.O. Box 1322

Nu'uuli

Pago Pago

AS

96799-6295

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

684-2581-0909

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

DAVID MICHAEL LANCASTER

Mailing Address

P.O. Box 1322

Nu'uuli

PAGO PAGO

AS

96799-6295

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

684-2581-0909

Full Name of
Designated
Agent

Mailing Address

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 of Bank, Depository, etc.

Amerika Samoa (ANZ) BANK

Mailing Address

Tafua Branch

P.O. Box 3790

Pago Pago

AS

96799-6295

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

30x 1.322



Washington D.C. 20463

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1-800-4-A-NEWS

Federal Election Commission
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☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked


PREPARER
(8/2013)

11/10/14
DATE PREPARED

FROM: 11/10/14 11:00