Americans for America 2012 APR -6 AM 6: 52 03/28/12 FEC MAIL CENTER

**Federal Election Commission** 

999 E Street, NW

Washington, DC 20463

Re: Form 1, Statement of Organization - Independent Expenditures

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in Speech Now v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Ding Binstein

Guy Burstein, President Americans for America

| FEC<br>FORM 1                                                                 | STATEMENT OF<br>ORGANIZATION                                                                          | RECEIVED<br>2012 APR -6 AM 6:52<br>FEC Moticipue Pointer                               |
|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| I. NAME OF<br>COMMITTEE (in full)                                             | (Check if name Example: If typing is changed) over the lines.                                         |                                                                                        |
| Americans for                                                                 | America                                                                                               | <u></u>                                                                                |
| ADDRESS (number and street                                                    | 3250 Fairesta Street #B                                                                               | <u> </u>                                                                               |
| (Check if address<br>is changed)                                              | La Crescenta                                                                                          | CA 91214                                                                               |
|                                                                               | CITY                                                                                                  | STATE ZIP CODE                                                                         |
| OMMITTEE'S E-MAIL ADD                                                         | RESS (Please provide only one e-mail address)                                                         |                                                                                        |
| (Check if address<br>is changed)                                              | , <b>[paç@burste₋in</b> <u>, , , , , ,</u>                                                            |                                                                                        |
| COMMITTEE'S WEB PAGE<br>(Check if address<br>is changed)<br>2. DATE <b>03</b> | pac.burste.in                                                                                         |                                                                                        |
| . FEC IDENTIFICATION                                                          |                                                                                                       |                                                                                        |
| . IS THIS STATEMENT                                                           |                                                                                                       | DED (A)                                                                                |
| certify that I have examine                                                   | d this Statement and to the best of my knowledge a                                                    | nd belief it is true, correct and complete.                                            |
| Type or Print Name of Treas                                                   | surer Guy Burstein                                                                                    |                                                                                        |
| Signature of Treasurer                                                        | Ly Bunstein                                                                                           | Date Ö3 <sup>v</sup> 28° 20'12 '                                                       |
| NOTE: Submission of false, en                                                 | roneous, or incomplete information may subject the personance ANY CHANGE IN INFORMATION SHOULD BE REF | on signing this Statement to the penalties of 2 U.S.C. §437g<br>PORTED WITHIN 10 DAYS. |
| Office<br>Use                                                                 |                                                                                                       | nformation contact:<br>on Commission<br>424-9530 (Revised 02/2009)                     |

FEC Form 1 (Revised 02/2009)

|                     | didate              | 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<br>Candi       |                     | <b>1</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |
| Candi<br>Party      | idete<br>Affiliatio | on Office State State District                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |
| (c)                 |                     | This committee supports/opposes only one candidate, and is NOT an authorized committee.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |  |
| Name<br>Candi       | -                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| Part                | y Com               | nmittee:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |
| (d)                 |                     | (National, State(Democratic,This committee is aor subordinate) committee of theRepublican, etc.) Par                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
| Polit               | ical A              | ction Committee (PAC):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |
| (e)                 |                     | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |
|                     |                     | Corporation Corporation w/o Capital Stock Labor Organization                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |
|                     |                     | Membership Organization Trade Association Cooperative                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |  |
|                     |                     | In addition, this committee is a Lobbyist/Registrant PAC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |  |
| (f)                 | $\mathbf{X}$        | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or particular that are a segregated fund or particular th |  |  |  |  |
|                     |                     | 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               | Fund                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| <b>Joint</b><br>(g) | Fund                | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |
|                     | Fund                | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)<br>Iraising Representative:<br>This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political<br>committees/organizations, at least obe of which is an authorized committee of a federal candidate.<br>This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |
| (g)                 | Fund                | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) Inaising Representative: This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least obe of which is an authorized committee of a federal candidate.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |
| (g)                 |                     | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)<br>Iraising Representative:<br>This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political<br>committees/organizations, at least obe of which is an authorized committee of a federal candidate.<br>This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |
| (g)                 |                     | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)<br>In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)<br>In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)<br>In addition, this committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least obe of which is an authorized committee of a federal candidate.<br>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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| (g)                 | Com                 | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)<br>Iraising Representative:<br>This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political<br>committees/organizations, at least obe of which is an authorized committee of a federal candidate.<br>This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political<br>committees/organizations, none of which is an authorized committee of a federal candidate.<br>This committees/organizations, none of which is an authorized committee of a federal candidate.<br>mittees Participating in Joint Fundraiser                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |
| (g)                 | Comi<br>1.<br>2.    | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) Iraising Representative: This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least obe of which is an authorized committee of a federal candidate. This committees 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. mittees Participating in Jaint Fundraiser FEC ID number C FEC ID number C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |
| (g)                 | Comi                | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) Iraising Representative: This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least obe of which is an authorized committee of a federal candidate. 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. mittees Participating in Joint Fundraiser                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |

Page 3

| Write or Type | Committee | Name |
|---------------|-----------|------|
|---------------|-----------|------|

1

## Americans for America

| 6. | Name of Any Connected Orga                                           | anization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spon                     | sor          |
|----|----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|--------------|
| L  |                                                                      |                                                                                                               |              |
| L  |                                                                      |                                                                                                               |              |
|    | Mailing Address                                                      |                                                                                                               |              |
|    | L                                                                    |                                                                                                               |              |
|    | L                                                                    |                                                                                                               |              |
|    |                                                                      | CITY STATE ZIP CODE                                                                                           |              |
|    | Relationship: Connected Or                                           | Organization Affiliated Committee Uoint Fundraising Representative Leadership PAC S                           | 3ponsor      |
| 7. | Custodian of Records: Identify books and records.                    | y by name, address (phone number optional) and position of the person in possession of cor                    | nmittee      |
|    |                                                                      | Irstein                                                                                                       | ]            |
|    | Mailing Address                                                      | 3250 Fairesta Street #B16                                                                                     |              |
|    |                                                                      |                                                                                                               |              |
|    | Ĺ                                                                    | La Crescenta                                                                                                  |              |
|    | Title or Position                                                    | CITY STATE ZIP CODE                                                                                           |              |
|    | President                                                            | Telephone number 818 - 306 - 021                                                                              | [ <b>8</b> ] |
| 8. | Treasurer: List the name and ac<br>any designated agent (e.g., assis | address (phone number optional) of the treasurer of the committee; and the name and addressistant treasurer). | ss of        |
|    | Full Name<br>of Treasurer                                            | Irstein                                                                                                       |              |
|    | Mailing Address                                                      | 3250 Fairesta Street #B16                                                                                     | <u> </u>     |
|    |                                                                      |                                                                                                               |              |
|    | Ĺ                                                                    | La Crescenta                                                                                                  |              |
|    | Title or Position<br>  <b>Preșident</b>                              | Telephone number  818,  - 306,  - 021                                                                         | 18           |

|                                                                                              | evised 02/2009)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Page 4                                        |
|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
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| Full Name of<br>Designated                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                               |
| Agent                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                               |
| Mailing Address                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                               |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <u> </u>                                      |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                               |
| Title or Position                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                               |
|                                                                                              | Telephone number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |
|                                                                                              | · · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                               |
| safety deposit boxes or<br>Name of Bank, Deposit                                             | r maintains funds.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | leposits funds, holds accounts, ren           |
| safety deposit boxes or<br>Name of Bank, Deposit                                             | r maintains funds.<br>tory, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |
| safety deposit boxes or<br>Name of Bank, Deposit                                             | <sup>-</sup> maintains funds.<br>tory, etc.<br>ῆ <mark>k,of Αmerica</mark>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                               |
| safety deposit boxes or<br>Name of Bank, Deposit                                             | maintains funds.<br>tory, etc.<br><u>Nk of America</u><br><u>13141 Foothill Boulevard</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | -↓ -↓ -↓ -↓ -↓ -↓ -↓ -↓ -↓ -↓ -↓ -↓ -↓ -      |
| safety deposit boxes or<br>Name of Bank, Deposit                                             | maintains funds.<br>tory, etc.<br>[3]141 Foothill Boulevard<br>[La Crescenta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |
| safety deposit boxes or<br>Name of Bank, Deposit<br>Bailing Address                          | rmaintains funds.<br>tory, etc.<br>[3]141 Foothill Boulevard<br>[1]141 Foothill | <u>, , , , , , , , , , , , , , , , , , , </u> |
| safety deposit boxes or<br>Name of Bank, Deposit                                             | rmaintains funds.<br>tory, etc.<br>[3]141 Foothill Boulevard<br>[1]141 Foothill | <u>, , , , , , , , , , , , , , , , , , , </u> |
| safety deposit boxes or<br>Name of Bank, Deposit<br>Bailing Address                          | rmaintains funds.<br>tory, etc.<br>[3]141 Foothill Boulevard<br>[1]141 Foothill | <u>, , , , , , , , , , , , , , , , , , , </u> |
| safety deposit boxes or<br>Name of Bank, Deposit<br>Mailing Address<br>Name of Bank, Deposit | rmaintains funds.<br>tory, etc.<br>[3]141 Foothill Boulevard<br>[1]141 Foothill | ATE ZIP CODE                                  |
| safety deposit boxes or<br>Name of Bank, Deposit<br>Mailing Address<br>Name of Bank, Deposit | rmaintains funds.<br>tory, etc.<br>[3]141 Foothill Boulevard<br>[1]141 Foothill | ATE ZIP CODE                                  |
| safety deposit boxes or<br>Name of Bank, Deposit<br>Bailing Address                          | rmaintains funds.<br>tory, etc.<br>[3]141 Foothill Boulevard<br>[1]141 Foothill | ATE ZIP CODE                                  |

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| Federal Election Com<br>ENVELOPE REPLACEMENT PAGE FOR<br>The FEC added this page to the end of this filing | INCOMING DOCUMENTS                    |
|------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Hand Delivered                                                                                             | Date of Receipt                       |
| USPS First Class Mail                                                                                      | Postmarked<br>3/28/12                 |
| USPS Registered/Certified                                                                                  | Postmarked (R/C)                      |
| USPS Priority Mail                                                                                         | Postmarked                            |
| Delivery Confirmation <sup>™</sup> or Signation                                                            | ature Confirmation <sup>™</sup> Label |
| USPS Express Mail                                                                                          | Postmarked                            |
| Postmark Illegible                                                                                         |                                       |
| No Postmark                                                                                                | · · · · · · · · · · · · · · · · · · · |
| Overnight Delivery Service (Specify):                                                                      | Shipping Date                         |
| N                                                                                                          | ext Business Day Delivery             |
| Received from House Records & Registration                                                                 | Date of Receipt<br>Office             |
| Received from Senate Public Records Office                                                                 | Date of Receipt                       |
| Received from Electronic Filing Office                                                                     | Date of Receipt                       |
| Other (Specify):                                                                                           | Date of Receipt or Postmarked         |
| r                                                                                                          | 4/6/12                                |
| PREPARER<br>(3/2005)                                                                                       | DATE PREPARED                         |