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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 X COMMITTEE (in full) over the lines. is changed) CARELESS PAC PO BOX 394 ADDRESS (number and street) (Check if address is changed) **JOHNSTOWN** 15907 PΑ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Peg@carelesshillary.org (Check if address X is changed) Optional Second E-Mail Address sbm@fecreports.com COMMITTEE'S WEB PAGE ADDRESS (URL) carelesshillary.org (Check if address is changed) DATE 01 2016 C00622381 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. SCOTT B MACKENZIE Type or Print Name of Treasurer SCOTT B MACKENZIE [Electronically Filed] 10 01 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. **FEC FORM 1** 

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

FF0 <b>=</b>	4 (Deviced 00/0000)	Don- 0
	orm 1 (Revised 02/2009)  COMMITTEE	Page 2
	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(c) <b>x</b>	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected 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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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FEC Form 1 (Revi		Page <b>3</b>
CARELESS		
	ted Organization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STAT	TE ZIP CODE
Relationship: Conn	Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
. Custodian of Records: books and records.	: Identify by name, address (phone number optional) and position of t	he person in possession of committee
I	TT B MACKENZIE	
Full Name	2776 S ARLINGTON MILL DRIVE	
Mailing Address	NUM 806	
	ARLINGTON	22206
Title or Position	CITY STATE	ZIP CODE
TREASURER	Telephone number	703 868 - 1776
B. <b>Treasurer:</b> List the nam any designated agent (e	e and address (phone number optional) of the treasurer of the comme.g., assistant treasurer).	ittee; and the name and address of
Full Name SCOT of Treasurer	FT B MACKENZIE	
Mailing Address	2776 S ARLINGTON MILL DRIVE	
	NUM 806	
	ARLINGTON	22206
Title or Position	CITY STATE	ZIP CODE
TREASURER	Telephone number	703 - 868 - 1776

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Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position	Teleph	one number	
Name of Bank, Depositor	-		
·	LS FARGO BANK  1711 FERN STREET  ALEXANDRIA	VA   2230	
WEL	LS FARGO BANK  1711 FERN STREET	VA 2230 STATE	ZIP CODE
WEL	LS FARGO BANK  1711 FERN STREET  ALEXANDRIA  CITY		
Mailing Address	LS FARGO BANK  1711 FERN STREET  ALEXANDRIA  CITY		
Mailing Address  Name of Bank, Depositor	LS FARGO BANK  1711 FERN STREET  ALEXANDRIA  CITY		ZIP CODE
Mailing Address  Name of Bank, Depositor	LS FARGO BANK  1711 FERN STREET  ALEXANDRIA  CITY		ZIP CODE
Mailing Address  Name of Bank, Depositor	LS FARGO BANK  1711 FERN STREET  ALEXANDRIA  CITY		ZIP CODE

## : 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures in opposition to Hillary Clinton who is running for President, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow 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.

Form/Schedule: Transaction ID: