FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2813 APR 29 AM 8: 30

FEC MAIL CENTER

| | | | | fice Use Only | | |
|-----------------------------------|---|--|--|--|--|--|
| NAME OF COMMITTEE (in full) | (Check if name is changed) | Example:If typing, type over the lines. | 12FE4M5 | e de la composition della comp | | |
| Hickory Ground | Solutions Politic | cal Action Comr | nittee | | | |
| | FOC Foundain | Cata Dand | <u> </u> | | | |
| ADDRESS (number and street) | 506 Fountain Gate Road Heathsville, VA 22435 | | | | | |
| (Check if address is changed) | | | | | | |
| | | CITY | STATE | ZIP CODE | | |
| COMMITTEE'S E-MAIL ADDRE | | | | | | |
| (Check if address is changed) | pjoblaw@aol. | com | | | | |
| COMMITTEE'S WEB PAGE AD | DRESS (URL) | | and the second second | | | |
| (Check if address is changed) | none | | | | | |
| 2. DATE 04 / 19 | 2013 | | | | | |
| 3. FEC IDENTIFICATION N | UMBER C | and the section of th | | | | |
| 4. IS THIS STATEMENT | NEW (N) OR | AMENDED (A) | | • | | |
| I certify that I have examined to | his Statement and to the best | t of my knowledge and belief | it is true, correct an | d complete. | | |
| Type or Print Name of Treasure | Patrick J. O'E | Brien | | | | |
| Signature of Treasurer | fur 80 " | | Date 04 " | 19 2013 | | |
| NOTE: Submission of false, erron | • | may subject the person signing ON SHOULD BE REPORTED V | | penalties of 2 U.S.C. §437g. | | |
| Office Use | | For further information Federal Election Commiss Toll Free 800-424-9530 | | FEC FORM 1 (Revised 02/2009) | | |

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|-----------------------------------|--|--|--|--|--|--|--|
| TYPE OF CO | E OF COMMITTEE | | | | | | |
| Candidate | e Committae: | | | | | | |
| (a) | This committee is a principal campaign committee. (Complete the candidate information below.) | | | | | | |
| (b) | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) | | | | | | |
| Name of Candidate | e of | | | | | | |
| Candidate Party Affiliation | on Office Sought: House Senate President | State | | | | | |
| _ | | District | | | | | |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | | | | | | |
| Name of Candidate | | | | | | | |
| Party Com | mittee: | | | | | | |
| (d) | t 9 1 8 8 | (Democratic, Republican, etc.) Party. | | | | | |
| Political A | Political Action Committee (PAC): | | | | | | |
| (e) X | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a | | | | | | |
| | Corporation Corporation w/o Capital Stock | Labor Organization | | | | | |
| | | • | | | | | |
| | Membership Organization Trade Association | Cooperative | | | | | |
| | In addition, this committee is a Lobbyist/Registrant PAC. | | | | | | |
| (f) · | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., noncommetted committee) | | | | | | |
| | In addition, this committee is a Lobbyist/Registrant PAC. | | | | | | |
| | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | | | | | | |
| Joint Fundraising Representative: | | | | | | | |
| (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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. | o or more political | | | | | |
| Com | mittees Participating in Joint Fundraiser | | | | | | |
| 1. | | | | | | | |
| 2. | | Brand servitani da karandari e Amerid James (uman <mark>gan meng</mark> anangan berugan m | | | | | |
| 3. | | transita emila asil imanta endirami ganing an ganingan eparagan | | | | | |
| 4. | La | and the second s | | | | | |

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|----|--|--|---|
| ٧ | Vrite or Type Committee Na | me | |
| H | Hickory Ground | d Solutions Political Action Committee | |
| 6. | Name of Any Connected | d Organization, Affiliated Committee, Joint Fundralsing Representative, or | Leadership PAC Sponsor |
| ŀ | Hickory Groun | ¢ Solutions, LLC: | |
| L | | | |
| | Mailing Address | 506 Fountain Gate Road | |
| | g | | |
| | | Heathsville | 122473 |
| | | CITY STATE | ZIP CODE |
| | Relationship: Connec | cted Organization Affiliated Committee Joint Fundraising Representative | re Leadership PAC Sponsor |
| 7. | Custodian of Records: le books and records. | dentify by name, address (phone number optional) and position of the pers | son in possession of committee |
| | Full Name Patr | ick J. O'Brien | 1 1 1 1 1 1 1 1 1 1 |
| | Mailing Address | ₁ P.O. Box 631 | |
| | Maining Macroso | | |
| | | Callao | 22435 - |
| | Title or Position | CITY STATE | ZIP CODE |
| | THE OF FUSION | OIT OINE | 211 0002 |
| | Treasurer | Telephone number 804 | |
| 8. | Treasurer: List the name any designated agent (e.g | and address (phone number optional) of the treasurer of the committee; ar g., assistant treasurer). | nd the name and address of |
| | Full Name of Treasurer | ick J. O'Brien | 1 |
| | Mailing Address | P.O. Box 631 | |
| | | | |
| | | Callao | 22435 |
| | Title or Position | CITY STATE | ZIP CODE |
| | | Telephone number | |
| | | | |

CITY

STATE

ZIP CODE

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Tara Miller

Full Name of Designated

Mailing Address

Agent

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED

(3/2005)