FEC FORM

1503-143-0747

STATEMENT OF **ORGANIZATION**

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			2015 office	Jse Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	AM 7: 02
President	Warrent	Roderick	Ashe	
President	Marven R	adenick A	she	ليبييي
ADDRESS (number and street)	4219-A	Newsome	Dinider	أحمدتنيا
(Check if address is changed)	SAME	لللللللة المستثقلة	<u></u>	
	Wewpart y	Veus,	MA 1234 STATE	ZIP CODE A
COMMITTEE'S E-MAIL ADDR	ESS			•
☐ (Check if address is changed)	Preside	nt Warren	Roderi	CK, AShe
	Optional Second E-Mail A	Address ArenAtone18	HOTMAN	4 COM
COMMITTEE'S WEB PAGE A	DDRESS (URL)			
(Check if address is changed)	Prasider	nt Warren	Raderio	KASHO
	PresiNavn	enAshe & H	otmail	e e o m
2. DATE 65	id agist		The second secon	
3. FEC IDENTIFICATION	имвег ▶ С	00576843	. 	
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined	this Statement and to the be	est of my knowledge and belie	f it is true, correct and co	mplete.
Type or Print Name of Treasu	rer Presiden	t Warren	R. Ash.	<u>e</u>
Signature of Treasurer	Prejedent 1/1 has	Lev R. Afle	Date 05	20/20/3

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.						
Office Use			-, ", ", ","	For further information contact: Federal Election Commission Toll Free 800-424-9530	FEC FORM 1 (Revised 06/2012)	_

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5.		TYPE OF COMMITTEE Candidate Committee:				
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)			
	(b)	V	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
	Name o Candida		President Warnen Rodenick Ashe			
	Candida Party At		on DEM Office State President District			
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name o					
	Party	Com	nmittee:			
	(d)		This committee is a (National, State or subordinate) committee of the DEM (Democratic, Republican, etc.) Party.			
	Politic	al A	ction Committee (PAC):			
-	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:			
			Corporation Corporation w/o Capital Stock Labor Organization			
			Membership Organization Trade Association Cooperative			
			In addition, this committee is a Lobbyist/Registrant PAC.			
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
			In addition, this committee is a Lobbyist/Registrant PAC.			
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
	Joint F	Fund	Iraising Representative:			
	(g)	V	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
		Com	mittees Participating in Joint Fundraiser			
		1.	PHOS. WOYNAM R. ASHA FEC ID number C100576843			
		2.	FEC ID number C			
		3.	FEC ID number			
		4.				

FEC Form 1 (Revi	sed 02/2009)	Page 3
Write or Type Committee I	lame	
Presider	it Warren Roderick	Asne
6. Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundralsing Rep	
President	Mannen Rodenick A	5/12
Mailing Address	4219-A NEW 2510M& D	milue
	5 W.m. 4	<u> </u>
	Newport News, 111	WH 1236019
	CITY	STATE ZIP CODE
Relationship: Conr	ected Organization Affiliated Committee Joint Fundraising	g Representative Leadership PAC Spons
7. Custodian of Records books and records.	Identify by name, address (phone number optional) and posi	ition of the person in possession of committ
Full Name Pr	esident Warren Rod	erick Ashe
Mailing Address	4219-4 Nousome	
	150 mg	
	Newport News	VA 23607-
Title or Position	CITY	STATE ZIP CODE
Preside	Zut Telephone nu	umber 1757-1245-126
	e and address (phone number optional) of the treasurer of the e.g., assistant treasurer).	ne committee; and the name and address of
Full Name of Treasurer	audette Delois Ash	<u>e</u>
Mailing Address	1004 South Frank	Klin Street
	1008 South Frank	Klin Street
	ROCKY Mocout,	M.G. 127803 STATE ZIP CODE
Title or Position	aant	
theascen	CU Q Q R N T Telephone nu	umber

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FEC Form 1 (Revised	1 02/2009)		Page 4
Full Name of Designated Agent	udette Dalois	•	لتنسيسا
Mailing Address	11004 South Fu		
	4008 South Pr	anklin S	tract
	Rocky Mount,	STATE:	40803 ZIP CODE
Title or Position			
treasceru	gagent, 1	lephone number	
Banks or Other Depositoric safety deposit boxes or main	es: List all banks or other depositories in which ntains funds.	the committee deposits fund	ds, holds accounts, rents
Name of Bank, Depository, e	etc.		
MA	He House Fed	eval Gradi	7 agion
Mailing Address	Pennsylvania	QUENUR	
		_ 	
	Washington, D.		البيا-البيا
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
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Mailing Address			
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·	CITY	STATE	ZIP CODE

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Date of Receipt 6/1/15
USPS Registered/Certified	Postmarked (R/C)
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Overnight Delivery Service (Specify):	Shipping Date
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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
Other (Specify):	eceipt or Postmarked
	6/1/15
(3/2015)	DATE PREPARED