

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

ANN BROOKES FOR CONGRESS

ADDRESS (number and street)

PO BOX 274

- ☐ (Check if address is changed)

WESTBROOK

CITY ▲

CT

STATE ▲

06498

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

- ☐ (Check if address is changed)

info@annbrookesforcongress.com

Optional Second E-Mail Address

alex.barna.cpa@comcast.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

- ☐ (Check if address is changed)

www.annbrookesforcongress.com

2. DATE

04

05

2016

3. FEC IDENTIFICATION NUMBER ►

C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer ALEX BARNA

Signature of Treasurer

ALEX BARNA

Alex Barna

Date

04

05

2016

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.

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

FEC FORM 1
(Revised 06/2012)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

ANN E. BROOKES

Candidate Party Affiliation

REP

Office Sought:



House



Senate



President

State

CT

District

02

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

Name of Candidate

Party Committee:

- (d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.		FEC ID number	
2.		FEC ID number	
3.		FEC ID number	
4.		FEC ID number	

Write or Type Committee Name

ANN BROOKES FOR CONGRESS

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

ALEX BARNA

Mailing Address

270 S WOODMONT DR

DOWNTOWN

PA

19335

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

610

873

8215

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

ALEX BARNA

Mailing Address

270 S WOODMONT DR

DOWNTOWN

PA

19335

Title or Position
TREASURER

CITY

STATE

ZIP CODE

Telephone number

610

873

8215

Full Name of
Designated
Agent

SANDY SEWALL

Mailing Address

110 LAMB TAVERN LANE

GLENMOORE

CITY

PA

STATE

19343

ZIP CODE

Title or Position

ASST TREASURER

Telephone number

610

942

7625

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

TD BANK

Mailing Address

180 E LINCOLN HIGHWAY

EXTON

CITY

PA

STATE

19341

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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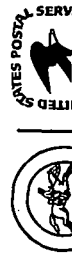


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2016 APR -6 AM 11

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FROM: (PLEASE PRINT)
Alex Barna
270 S. Washington Dr.
Downtown, PA 19335
PHONE (610) 873-8831

PAYMENT BY ACCOUNT (if applicable)

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TO: (PLEASE PRINT)

Federal Election Commission
999 E Street, NW
Washington, DC 20463-0001
ZIP+4® (U.S. ADDRESSES ONLY)
20463-0001
PHONE ()

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Scheduled Delivery Date (MM/DD/YYYY) 4/7/16
PO ZIP Code 19335
Date Accepted (MM/DD/YYYY) 4/7/16
Scheduled Delivery Time ☐ 10:30 AM ☐ 3:00 PM ☒ 12 NOON
10:30 AM Delivery Fee \$
Time Accepted 11:49 AM
Weight 16.49 lbs. Flat Rate \$
Sunday/Holiday Premium Fee \$
Return Receipt Fee \$
Live Animal Transportation Fee \$
Insurance Fee \$
COD Fee \$
Total Postage & Fees \$22.95

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Delivery Attempt (MM/DD/YYYY) Time ☐ AM ☐ PM Employee Signature

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Federal Election Commission
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PREPARED
(3/2015)

4/6/16
DATE PREPARED

20160406 10:00:00 AM