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FEC

STATEMENT OF **ORGANIZATION**

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FORM 1	OHGANIZATION			FEC	FEC MAIL CENTER Office Use Only		
1. NAME OF COMMITTEE (in	ı full)	(Check if is changed)		Example: If typing, type over the lines.	312FE4M	The second secon	
FREE MAI	RKET	FEDERA	<u>L</u> , , ,		<u> </u>		
	1_1_1_1_	40 COM	MFRO	E DRIVE	<u>i I I I I I</u>		
ADDRESS (number a	nd street)	40 COM	INIFIC	PEDRIVE			
(Check if address is changed)		LEBANC)N			62254	
			c	CITY	STATE	ZIP CODE	
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) JOE@MOLDINGANDCOATING.COM (Check if address)							
is change			1 1 1 1		<u> </u>		
COMMITTEE'S WEB	PAGE ADD	RESS (URL)	nas i d			·	
(Check if is change					4"* .'''		
2. DATE 03	3 / 8	2012			•		
3. FEC IDENTIFIC	CATION NUM	MBER	C	en d'année de la company de la			
4. IS THIS STATE	MENT 🗵	NEW (N)	OR	AMENDED (A)			
I certify that I have e	examined this	Statement and	to the best	of my knowledge and belief	it is true, correc	t and complete.	
Type or Print Name	of Treasurer	JOSEP	H BEH	INKEN	Harrison over 100 gill till state af till frem 100 state o		
Signature of Treasure	er <u> </u>	102	Ge	lurke	Date 03	12 ° / 2012 `	
NOTE: Submission of		·		nay subject the person signing N SHOULD BE REPORTED \		the penalties of 2 U.S.C. §437g.	
Office Use Only				For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)	

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TYPE OF COMMITTEE								
C	andidate	e Committae:						
(a)	Ц	This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)	اسيا	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	me of Indidate	Participants						
	ndidate rty Affiliat	Office Sought: House Senate President	State					
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District [
	me of ndidate							
Pa	rty Con	mmittee:						
(d)		15 18	emocratic, epublican, etc.) Party.					
Political Action Committee (PAC):								
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a:					
		Corporation W/o Capital Stock	Labor Organization					
		Membership Organization Trade Association	Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.						
(f)	\times	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.)						
Joi	int Fund	draising 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.	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.	or more political					
	Com	nmittees Participating in Joint Fundraiser						
	1.	FEC ID number	generapsungsunsgamingun upu kacadaseka sekese 2 o					
	2.		of our formalisassissor function					
	3.	FEC ID number	ong sanganangananganan kecasa di di di di di di di di di di					
	4.	FEC ID number C						

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Write or Type Committee Name								
FREE MARKET FEDERAL								
6. Name of any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor								
Mailing Address								
1 1 1 1 1 1 1 1 1 1								
	1							
CITY STATE	ZIP CODE							
	. п							
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representati	ive Leadership PAC Sponsor							
 Custodian of Records: Identify by name, address (phone number optional) and position of the per books and records. 	rson in possession of committee							
JOSEPH BEHNKEN	1							
Full Name 140 COMMERCE DRIVE								
Mailing Address								
LEBANON LL	62254							
Title or Position CITY STATE	ZIP CODE							
CHAIRMAN Telephone number 618	3, _ 808, _ 0500 ,							
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; a any designated agent (e.g., assistant treasurer).	and the name and address of							
Full Name JOSEPH BEHNKEN	,							
of Treasurer								
Mailing Address 40 COMMERCE DRIVE								
LEBANON , , , , , , , , , , , , , , , , , ,	62254							
CITY STATE Title or Position	ZIP CODE							
TREASURER Telephone number [618]	3, - [808, - [0500 ,							

CITY

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ZIP CODE

STATE

FEC Form 1 (Revised 02/2009)

Full Name of

Mailing Address

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DATE PREPARED