

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

CYRUS FOR AMERICA COMMITTEE

P O B O X 1 4 5 2

ADDRESS (number and street)

(Check if address is changed)

L A M A R Q U E T X 7 7 5 6 8
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) V O T E C Y R U S F O R P R E S I D E N T @ G M A I L . C O M

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) https://cyrusforpresident2020.yolasite.com/

2. DATE 0 2 / 2 5 / 2 0 1 8

3. FEC IDENTIFICATION NUMBER C C 0 0 6 6 6 6 2 8

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 CYRUS SAJNA

Signature of Treasurer Date 0 2 / 2 5 / 2 0 1 8

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.

NON-FEDERAL ELECTIONS

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 C Y R U S S A J N A

Candidate Party Affiliation DEM 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 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	<input type="checkbox"/> _____
2.	_____	FEC ID number	<input type="checkbox"/> _____
3.	_____	FEC ID number	<input type="checkbox"/> _____
4.	_____	FEC ID number	<input type="checkbox"/> _____

NON-PROFIT ORGANIZATION

Write or Type Committee Name

CYRUS FOR AMERICA COMMITTEE

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

NONE

Mailing Address

[Empty address fields]

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 | CYRUS SAJNA

Mailing Address | P.O. BOX 1452

[Empty address line]

LAMARQUE | TX | 77568

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number | 832 - | 410 - | 2495

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 | CYRUS SAJNA

Mailing Address | P.O. BOX 1452

[Empty address line]

LAMARQUE | TX | 77568

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number | 832 - | 410 - | 2495

NON-PROFIT CORPORATION

Full Name of Designated Agent

CYRUS SAJNA

Mailing Address

P.O. BOX 1452

LAMARQUE TX 77568

CITY STATE ZIP CODE

Title or Position

TREASURER

Telephone number 832-429-2495

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.

STRIPE, INC

Mailing Address

185 Berry Street, Suite 550

SAN FRANCISCO, CA 94107

CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Aristotle

Mailing Address

205 Pennsylvania Ave, SE

Washington, DC 20003

CITY STATE ZIP CODE

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INTERNATIONAL RESTRICTIONS APPLY:

15-POUND WEIGHT LIMIT ON INTERNATIONAL APPLIES

Customs forms are required. Consult the International Mail Manual (IMM) at pe.usps.gov or ask a retail associate for details.



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C Sajna
Cyrus For America Committee
PO BOX 1452
LA MARQUE TX 77568 - 1452

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WASHINGTON DC 20463-0001

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