FEC FORM 1		STATEN ORGAN				Office Use Only
1. NAME OF COMMITTEE (in t	full)	(Check if nam is changed)		ample:If typing, type er the lines.	12FE4M5	
	FOR E					ΓY
	_	PO BOX 984				
ADDRESS (number and	-					
(Check if add is changed)	dress	WILLOWS			CA	95988
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MAIL (Check if a is changed	ddress	S (Please provide only treasurerlawler@sbc		ddress)		
COMMITTEE'S WEB I	PAGE ADDI	, ,				
(Check if an is changed)			rg 			
2. DATE 11	21	/ Y Y Y Y 2011				
3. FEC IDENTIFICA	ation nui	MBER	C004871	99		
4. IS THIS STATEM	ENT X	NEW (N) C	DR	AMENDED (A)		
I certify that I have ex	amined this	Statement and to the	e best of my	knowledge and belief i	t is true, correct a	and complete.
Type or Print Name of	f Treasurer	Kelly Lawler				
Signature of Treasurer	Kelly Lav	vler		[Electronically Filed]	Date 11	/ D D / Y Y Y Y 21 2011
NOTE: Submission of fa				ibject the person signing OULD BE REPORTED W		the penalties of 2 U.S.C. §437g.
Office Use Only				For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

11/21/2011 15 : 04

PAGE 1/4

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F	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	E OF C	OMMITTEE	
Can	ndidate	e 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. (Comp information below.)	lete the candidate
Name Cand	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of didate		
Parl	ty Con	nmittee:	
(d)			Democratic, Republican, etc.) Par
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	Х	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or par
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	Iraising 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.	o 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	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

CITIZENS FOR ECONOMIC AND NATIONAL SECURITY

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

Mailing Address				
		CITY	STATE	ZIP CODE
Relationship: Connec	ted Organization	Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
		_		
 Custodian of Records: Id books and records. 	lentify by name,	address (phone number	optional) and position of the person	in possession of committee

Kelly Lawle	r
Full Name	
Mailing Address	PO Box 984
	Willows CA 95988 - - -
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 530 934 5823

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	Kelly Lawler
Mailing Address	PO Box 984
	Willows CA 95988
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 530 934 5823

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																	I										
Mailing Address																											
																				L							
							CI	ΓY								ST/	λΤΕ					ZI	ΡC	DE			
Title or Position																											
											Tel	eph	ione	e ni	umt	ber											

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.

Tri	Counties Bank		
Mailing Address	210 N Tehama		
			<u> </u>
	Willows	CA	95988
	CITY	STATE	ZIP CODE
Name of Bank, Deposit	ory, etc.		
Wa	chovia Bank 100 N Main Street		
Mailing Address			
	Winston-Salem		27150
	CITY	STATE	ZIP CODE