RECEIVED FEC MAIL CENTER 2017 APR 24 AM 7: 43

Committee Name:	
The Loyal Oppposition	
If registered, FEC ID:	
Today's Date:	
April 11, 2017	

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

Karen Kirchen

, Treasurer

2017 - 04 - 24 - 03 - 00154845

FEC FORM 1

Only

STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER

2017 APR 24 AM 7: 43

				Office Use Only
NAME OF COMMITTEE (in full)		(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
THE LAYAL	$\partial_1 P_1 P_1$	OSITITITION		
ADDRESS (number and street)	P101	1B147 1812	43	
☐ (Check if address is changed)	سنا			
	HE	CITY A CITY A		STATE A ZIP CODE A
COMMITTEE'S E-MAIL ADDRE	SS			;
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COMMITTEE'S WEB PAGE AD (Check if address is changed)			pipioisii tii oinio	neit
2. DATE 0 2 1	b '[2017		
3. FEC IDENTIFICATION N	UMBER	▶ C		
4. IS THIS STATEMENT	NE	W (N) OR	AMENDED (A)	
I certify that I have examined t	his State	ment and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	er _	Karen Kir	chen	
Signature of Treasurer	-A	M		Date 04/11/2017
NOTE: Submission of false, error			may subject the person signing	this Statement to the penalties of 52 U.S.C. §30109
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530	contact: FFC FORM 1

Local 202-694-1100

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	FEC Fo	m 1 (Revised 02/2009)	Page 2
		OMMITTEE Committee:	
(a)	П	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. (Con information below.)	•
	e of didate		<u> </u>
	didate y Affiliati	Office Sought: House Senate President	State District
(c)	D	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	e of didate		
Par	ty Con	mittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Pa
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or pa
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	;
	at Euro	raising Representative:	
(g)	m	This committee collects contributions, pays fundraising expenses and disburses net proceeds for	wo or more political
13/	L	committees/organizations, at least one of which is an authorized committee of a federal candidate	•
(ħ)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number C	
	3.	FEC ID number	
	4.		* * * * * * * * * * * * * * * * * * *

	FEC Form 1 (Revised 0	2/2009)	Page 3	
Write	e or Type Committee Name		1	
6. N	ame of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Spons	or
10	ME			
Ш				
Ma	ailing Address			
			ـــا-لـــــــــــــــــــــــــــــــــ	
		CITY STATE	ZIP CODE	
Re	elationship: Connected	Organization Affiliated Committee Joint Fundraising Representative L	eadership PAC Sp	ponso
	ustodian of Records: Iden	tify by name, address (phone number optional) and position of the person in position of the person of the person in position of the person of	ossession of com	mittee
Fu	ull Name KiA Ric	EN KILBUMEIN		LL_
Ma	ailing Address	13,0,6, E 15,4,4h Street,	<u>. </u>	<u>Li</u>
		Apt. 30F.	1111	<u> </u>
		MEW YORK VIOLE	122-50	212
Tit	tle or Position	CITY STATE	ZIP CODE	
	IREASILIRER	Telephone number 2/2-1	8,7,81-13,2,	<u> </u>
8. Tr o	easurer: List the name and grant designated agent (e.g., a	d address (phone number - optional) of the treasurer of the committee; and the resistant treasurer).	ame and address	s of
	Ill Name Treasurer KARS	EN KIRCHEN		. · L
Ma	ailing Address	13.000 1E 15.4+1 1S.+1 reigt	11111	
		April 131014		
Tie	tle or Position	CITY STATE	22-60 ZIP CODE	<u>1217</u>
	IRIEIALS MIRIEIR	Telephone number $2 12 - $	8381-132	, 1 ₁ C

CITY

STATE

ZIP CODE

Mailing Address

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Karen Kirchen & Dennis Shea

300 East 54th Street Trees well Apartment 30DEF New York, NY 10022

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING I The FEC added this page to the end of this filing to indicate h	
Hand Delivered	Date of Receipt
USPS First Class Mail Postmarked 4/18/17	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
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
	4/24/17
(3/2015)	DATE PREPARED