Image# 201609199030952846				PAGE 1/5
FEC FORM 1	STATEMEI ORGANIZ			
				ffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
		; 		
ADDRESS (number and street)	P.O. BOX 11186			
(Check if address is changed)				
			AZ 851	30
	CITY 🔺		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDR				
 (Check if address is changed) 	chris@electioncfo.com			
	Optional Second E-Mail Ad brenda@electioncfo	dress ,com		
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)			
	19 / Y Y Y Y 2016			
. FEC IDENTIFICATION 1		00588673		
. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined	this Statement and to the best	of my knowledge and belief i	t is true, correct and	complete.
ype or Print Name of Treasu	rer Chris Marston			
Signature of Treasurer	is Marston	[Electronically Filed]	Date 09	19 / Y Y Y Y 19 2016
IOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing		penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

09/19/2016 13 : 50

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I	FEC Fo	m 1 (Revised 02/2009)	Page 2	
		OMMITTEE		
Can	ndidate	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	
Nam Canc	e of didate			
	didate y Affiliatio	on REP Office Sought: K House Senate President	State AZ District 01	
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name Cand	e of didate			
Par	ty Con	mittee:		
(d)			Democratic, Republican, etc.) Party	y.
Poli	itical A	ction Committee (PAC):		_
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 seg committee. (i.e., nonconnected committee)	regated fund or part	y
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Join	it Fund	raising 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	nittees Participating in Joint Fundraiser		
	1.	FEC ID number]
	2.	FEC ID number]
	3.	FEC ID number]
	4.	FEC ID number		
	4.	FEC ID number		

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

PAUL BABEU FOR CONGRESS

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

BABEU VI		ND														
Mailing Add	ress	5330 N 12TH ST	-													
		Phoenix							AZ		850	14		-L		
			С	ITY					STATE	Ξ			ZIP C	ODE		
Relationship	: Connected	d Organization	Affiliated	l Commit	ee)	Join	t Fund	raising	Represe	entati	ve	Lea	dersh	ip PA	IC Sp	ponsor
7. Custodian of books and r		ntify by name, add	dress (pho	one numl	oer (optiona	al) anc	l positi	on of th	e per	rson ir	n poss	sessio	on of	com	mittee
	Brenda Ha	ankins														
Full Name		PO Box 26141														·
Mailing Add	ress															
		Alexandria							VA		223	13		- _		
Title or Posi	tion		С	ITY					STATE			Z	ZIP C	ODE		
Assistant T	reasurer															

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	Chris Marston
Mailing Address	PO Box 26141
	Alexandria
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent								I	I																					
Mailing Address																														
																							L							
							СІЛ	ΓY											STA	ΤE					ZII	PC	COD	Ε		
Title or Position																														
														Tele	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.

Wells F	argo		
Mailing Address	420 Montgomery St		
	San Francisco	CA 94104	4
	CITY	STATE	ZIP CODE
Name of Bank, Depository, e	etc.		
United	Bank		
	500 Virginia St E		
Mailing Address			
	PO Box 393		
		WV 2531	
	CITY	STATE	ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011)

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Banks or Other Depositorie safety deposit boxes or maint		ich the committee deposits funds,	holds accounts, rents
Name of Bank, Depository, et			[ADDITIONAL]
Chạin	Bridge Bank, N.A.		
Mailing Address	1445-A Laughlin Ave		
	$\lfloor \ldots \ldots$		
	McLean		
	CITY 🗖	STATE 🗖	
- Name of Any Connected Or	ganization, Affiliated Committee, Joint Fun	draising Representative, or Lead	[ADDITIONAL] dership PAC Sponsor
Mailing Address			
Relationship:	СІТҮ	STATE	ZIP CODE 📥
Connected Organization	Affiliated Committee Joint Fur	ndraising Representative	adership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
C C			
			_
Title or Position		STATE	
	GIT 🖕	STATE	
		Telephone number	
Joint Fundraiser Participan	t		[ADDITIONAL]
		FEC ID number	