FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		ORGANIA	ZATIO	N		
		(See instru	ctions)			Office use only
NAME OF COMMITTEE (in full)	(Check if name is changed)		mple: If typying, type r the lines	12FE4M5	
Paula Brook	s for Congre	ess 				
ADDRESS (number a	nd street)	545 East Town St	reet 			
(Check if addr	ess		ш			
X is changed)		Columbus	ш	ليبيب	ОН	43215 -
			CITY	•	STATE	ZIP CODE 🛦
COMMITTEE'S E-N	IAIL ADDRESS	(Please provide only one	e e-mail addr	ress)		
(Check if addr is changed)	ess	dmctigue@election	nlawgrou	ip.com		
	l					
COMMITTEE'S WE (Check if addr is changed)	1	RESS (URL) http://paulabrooks	s.com			
2. DATE M	2 D D D	2011				
3. FEC IDENTIFIC	CATION NUMB	ER	C C00	0465344		
4. IS THIS STATI	EMENT X	NEW (N) OF	· [AMENDED (A)		
I certify that I have exa	mined this State	ment and to the best of my	knowledge ar	nd belief it is true, correct an	d complete	
Type or Print Name	of Treasurer	Anne Dorrian	Lenzotti			
Signature of Treasu	rer Electronic	cally Filed by Anne D	orrian Lei	nzotti	Date 0 2	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of				the person signing this State		
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)

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5.			DMMITTEE (Check One)					
	(a)	X	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 t information below.)	he candidate				
	Name Candi	-	Paula Brooks					
	Candi Party	date Affiliati	on Office X House Senate President	State OH	_			
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District	_			
	Name Candi							
	Party	Comm	ittee:					
	(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	ed organization is a:				
			Corporation Corporation w/o Capital Stock La	bor Organization				
			Membership Organization Trade Association C	ooperative				
	(f)		In addition, this committee is a Lobbyist/Registrant PAC. This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate	d 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 F	undra	ising Representative:					
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two ocmmittees/organizations, at least one of which is an authorized committee of a federal candidate.	r 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.	r 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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W	rite or Type Committee Name			
	Paula Brooks for Congre	ess		
6.	Name of Any Connected Org	anization, Affiliated Committee, Joint Fundra	sing Representative, or Leade	ership PAC Sponsor
Ш				
ш				
	Mailing Address			
		CITY▲	STATE ≜	ZIP CODE 🛦
	Relationship: Connected Organization	Affiliated Committee Joint F	undraising Representative	Leadership PAC Sponsor
	possession of Committee Full Name Mailing Address	e & McGinnis LLC 550 East Walnut Street		
		Columbus	ОН	43215
	Title or Position ▼ Custodian	CITY A of Records	STATE A Telephone number 614	ZIP CODE 1
8.	name and address of any Full Name	and address (phone number optional) of designated agent (e.g., assistant treasure orrian Lenzotti 7963 Greenside Lane		ttee; and the
		Columbus	ОН	43235 _
	Title or Position ♥	CITY A	STATE	ZIP CODE A
	Treasurer		Telephone number 614	263 7000

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	Full Name of Designated Agent			
	Mailing Address			
	Title or Position ▼	CITY A	STATE A	ZIP CODE A
		Telep	phone number	
9.	Banks or Other Depositories safety deposit boxes or mainta Name of Bank, Depository, etc	ins funds.	committee deposits funds, hold	ls accounts, rents
	Fifth T	hird Bank		
	Mailing Address	21 East State Street		
		Columbus	OH L	43215
		CITY 🗖	STATE △	ZIP CODE 🛕
	Name of Bank, Depository, etc			
	US Ba			
	Mailing Address	673 Mohawk Street		
		Octobra de la constanta de la		4000
		Columbus	OH _	43206
		CITY 🗖	STATE △	ZIP CODE 🛕

Banks or Other Depositories safety deposit boxes or maintai		ittee deposits funds, hol	ds accounts, rents
Name of Bank, Depository, etc			[ADDITIONAL]
Bank	of America		
Mailing Address	P.O. Box 27025		
	Richmond	VA	23261
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Org	ganization, Affiliated Committee, Joint Fundraising Rep	presentative, or Leade	[ADDITIONAL rship PAC Sponsor
Mailing Address			
		ا ليا ل	
elationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraising Rep	oresentative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
			-
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
	Telepho	one number	
			[ADDITIONAL]
Joint Fundraiser Participant			-