

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED  
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2016 NOV 15 AM 7:26  
Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

VOTE FOR MICHELLE "HOPE" WALKER FOR UNITED STATES OF AMERICA PRESIDENT 2020

ADDRESS (number and street) 540 S. NORMANDIE AVENUE APT. 602

(Check if address is changed)

LDS ANGELES CA 90020  
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Vote Michelle HOPE Walker President@yahoo.com  
VOTEMICHELLEHOPEWALKERPRESIDENT@YAHOO.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

M M / D D / Y Y Y Y

3. FEC IDENTIFICATION NUMBER

C 00 57 8591

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

Michelle "HOPE" Walker

Signature of Treasurer

*Michelle "HOPE" Walker*

Date

11 09 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

20161115 11:09:00 AM

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 MICHELLE "HOPE" WALKER

Candidate Party Affiliation IND Office Sought: House Senate X 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 C
2. [ ] FEC ID number C
3. [ ] FEC ID number C
4. [ ] FEC ID number C

Write or Type Committee Name Vote for michelle "HOPE" Walker For United States of America President 2020

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

[Empty grid lines for organization name]

Mailing Address [Empty grid lines]  
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 MICHELLE "HOPE" WALKER  
Mailing Address 540 S. NORMANDIE AVENUE APT. 602  
LOS ANGELES CA 90020  
CITY STATE ZIP CODE  
Title or Position TREASURER Telephone number 323-338-6580

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 MICHELLE "HOPE" WALKER  
Mailing Address 540 S. NORMANDIE AVENUE APT. 602  
LOS ANGELES CA 90020  
CITY STATE ZIP CODE  
Title or Position TREASURER Telephone number 323-338-6580

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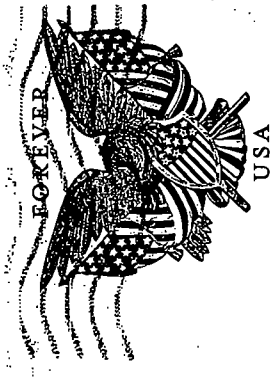


NOVEMBER 11 2016

Michelle "Hope" Walker  
540 S. Normandie Avenue  
Apt. 602  
Los Angeles, California  
90020

LOS ANGELES CA 900

09 NOV 2016 PM 11 1



Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20543

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**Federal Election Commission**  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
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<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER *[Signature]* DATE PREPARED *11/15/16*  
 (3/2015)