## 12030801870

**FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

RECEIVED 7

2012 MAY -3 AM 8: 52

NAME OF     COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	C.MAIL CENTER
JEIFIFI BOISISI	FIDITE PIRIESSINA	eINH 20112		
ADDRESS (number and street)	17,000 Blood	ELASITI ALPITI	26611	
(Check if address				
ਿਲੀ is changed)	16 vitition bein	9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	I NJ C	0709131-111
		DITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one e-	mail address)		
(Check if address	JE FIFIBIOISISI1	(a) A:011.60	MIII	
is changed)			<u> </u>	
COMMITTEE'S WEB PAGE AD	IDDESS (LIBIT)			
(Check if address	Marsa Jilifif	Bioisisifiairifir	esiden	twarg
is changed)				
2. DATE 0 1 2	8 2 42			
3. FEC IDENTIFICATION N	имвен Со.	0463463		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	1	
I certify that I have examined to	his Statement and to the best	of my knowledge and belie	of it is true, correct	and complete.
Type or Print Name of Treasure	er JEFF	Boss		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	A A		ž n × n	
Signature of Treasurer	July Br		Date O Y	282012
NOTE: Submission of false, erron	eous, or incomplete information ANY CHANGE IN INFORMATION		-	the penalties of 2 U.S.C. §437g.
Office Use Only		For further informatic Federal Election Comm Toll Free 800-242-9533	nission	FEC FORM 1 (Revised 02/2009)

		OMMITTEE
(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 the candidate information below.)
Name Cand		J.E.F.F. BOSS
Cand Party	idate Affiliati	ion IND Office Sought: House Senate President District 3.2
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Cand		
Part	y Con	nmittee:
(d)	\$1	This committee is a (National, State (Democratic, Republican, etc.) Party.
Poli	tical A	Action Committee (PAC):
(e)	Dec.	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.)
Join	t Fund	draising Representative:
(g)	#1. 24.1	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 Indoral candidate.
(h)	ir. Prvi	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.
	Con	nmittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number C
	3.	FEC ID number C
	4.	FEC ID number C

Full Name of Designated Agent  Mailing Address    Title or Position   Telephone number   Title or Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.    Mailing Address   Title or Position   Telephone number   Title or Position   Telephone nu		Page		1 (Revised 02/2009)	FEC Form
Designated Agent  Mailing Address    Title or Position   City   STATE   ZIP CODE					
Title or Position    STATE   ZIP CODE	1 [ ]			Jififi i Boisisi i i i i i i i	Designated
Title or Position  CITY  STATE  ZIP CODE  Title or Position  CITY  STATE  ZIP CODE  Telephone number  STATE  ZIP CODE  Telephone number  STATE  ZIP CODE  Telephone number  STATE  ZIP CODE  Name of Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address  TODO OF BILLIA STATE  ZIP CODE  Name of Bank, Depository, etc.		a G	1 1 Apt 21	710:012: BI) WIDE IE	Mailing Address
Title or Position  CITY  STATE  ZIP CODE  Title or Position  CITY  STATE  ZIP CODE  Telephone number  STATE  ZIP CODE  Telephone number  STATE  ZIP CODE  Telephone number  STATE  ZIP CODE  Name of Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  STATE  ZIP CODE  Name of Bank, Depository, etc.		<u> </u>	·		
Title or Position  [CIG_INITION   Page   Pag		0,7,0,9,3]-	ניין ניין	Gultitiembierra	
Telephone number  Telephone nu		ZIP CODE	STATE	СІТУ	
Safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.    B_A_N_k_A_me_File_A_ST     G_V_++	13,1,4	11-16-51-11	Telephone number	ate	_ \
Mailing Address    7.0.0   B.    U.d.   E. A. S.T.     Guttenberg   N.J.   O.7   O.9   3  - L.   CITY   STATE   ZIP CODE  Name of Bank, Depository, etc.	rents	is funds, holds accounts, re	rhich the committee deposit	es or maintains funds.	safety deposit boxe
Guttenberg   NJ   07 093-L  CITY STATE ZIP CODE  Name of Bank, Depository, etc.				BANK AMERICA	L
CITY STATE ZIP CODE  Name of Bank, Depository, etc.	1 1 1	111111	- <u>                                     </u>	7,000 BU Wid E	Mailing Address
CITY STATE ZIP CODE  Name of Bank, Depository, etc.			<u> </u>		
Name of Bank, Depository, etc.		0701913-	[N <sub>1</sub> 5]	(Guititieinibieirigi)	
	Ē	ZIP CODE	STATE	СПҮ	
Mailing Address	<del></del>			pository, etc.	Name of Bank, De
Mailing Address (, , , , , , , , , , , , , , , , , ,			•		1
Mailing Address					ł.
					Mailing Address
	<u> </u>				
CITY STATE ZIP CODE		<u> </u>			

FEC	Form 1 (Revise	d 02/2009)		Page 3
Write or Typ	e Committee Na	me		
6. Name of	Any Connecte	I Organization, Affiliated Committee, Joint Fundraising F	lepresentativ	e, or Leadership PAC Sponsor
	•		•	
Mailing A	ddress			
			l	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		CITY	STATE	ZIP CODE
	<b>9</b> 2.05			
Relations	hip: Conne	ted Organization Affiliated Committee Joint Fundral	sing Represer	tative Leadership PAC Sponsor
	n of Records: 1 d records.	dentify by name, address (phone number optional) and p	osition of the	person in possession of committee
Full Name	e JE	E.F. Boisisi		1 1 1 1 1 1 1 1 1 1
Mailing A	ddress	17,0,0,2, BILIUID, EAST, Apt	266	
			<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1
		Gutitienberg	[N.2]	0.7.0.9.31-
		/		•
Title or P	osition	CITY	STATE	ZIP CODE
Can	idilidia t	<u>Q</u>	number [C	11.71-16.5.11-11.3.1.4
	-			
		and address (phone number optional) of the treasurer of assistant treasurer).	the committee	e; and the name and address of
Full Name of Treasur	$\Sigma_{\text{rer}}$	F. F. B.O.S.S.		
Mailing A	ddress	MODEL Blud EAST APT	2,66	
-		1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	<u>. 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1</u>
		[Guititieinbieiria]	וכמו	10.7.0.9.31-1
		CITY	STATE	ZIP CODE
Title or Po	· 1	•	.c	11711/6111211
Can	idildiati	<b>Q</b> Telephone	number	<u> </u>

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt** 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 or Postmarked Other (Specify): DATE PREPARED

(3/2005)