PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 × COMMITTEE (in full) is changed) over the lines. Audrey Addison Williams Committee 302 West Alisos Street ADDRESS (number and street) (Check if address is changed) Ojai 93023 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS g72155@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.audreyaddisonwilliams.com (Check if address is changed) DATE 2016 C00617415 FEC IDENTIFICATION NUMBER > 3. X 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. Robert MacNeal Type or Print Name of Treasurer Robert MacNeal [Electronically Filed] 05 17 2016 Signature of Treasurer Date 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Only Local 202-694-1100

		4 (Deviced 00/0000)	Dani- O
		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE e Committee:	
(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. (Con information below.)	nplete the candidate
Name Cand	e of lidate	Audrey Addison Williams	
	lidate ⁄ Affiliati	on IND Office Sought: House Senate X President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Namo	e of lidate		
Parl	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 scommittee. (i.e., nonconnected committee)	egregated fund or party
		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	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number C	
	4.		

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Write or Type Committee Name		. J
Audrev Addisor	n Williams Committee	
	Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representa	tive Leadership PAC Sponsor
 Custodian of Records: Idea books and records. 	ntify by name, address (phone number optional) and position of the po	erson in possession of committee
Robert Ma	acNeal	
Full Name	1114 El Centro Street	
Mailing Address		
	Ojai CA	,93023
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	305 798 - 1850
8. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name Robert Ma	ıcNeal	
of Treasurer	1114 El Centro Street	
Mailing Address		
	Ojai CA	93023
Title or Position Treasurer	CITY STATE 8 Telephone number	ZIP CODE 798 - 1850

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Full Name of Designated Agent	Ann Lister	
Mailing Address	754 International Blvd # 27	
	Houston TX 77024	ZIP CODE
Title or Position Assistant Treasure	er	
safety deposit boxe Name of Bank, Dep	Depositories: List all banks or other depositories in which the committee deposits funds, ho es or maintains funds. Expository, etc. Bank of America	olds accounts, rents
L		
	1096 Coast Village Road	
Mailing Address	1096 Coast Village Road	
Mailing Address	Santa Barbara CA 93108	3 1 - 1 - 1 - 1 - 1
Mailing Address		ZIP CODE
Mailing Address Name of Bank, Dep	Santa Barbara CA 93108 CITY STATE	
	Santa Barbara CA 93108 CITY STATE	
	Santa Barbara CITY STATE epository, etc.	
Name of Bank, Dep	Santa Barbara CITY STATE epository, etc.	
Name of Bank, Dep	Santa Barbara CITY STATE epository, etc.	