

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2014 MAY -5 AM 11:36
Office Use Only

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

12 FEDERAL MAIL CENTER

VETERANS' PARTY OF AMERICA

ADDRESS (number and street)

PO BOX 16242

(Check if address is changed)

SACRAMENTO CA 95816
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

CHAIRMAN@VETERANSPARTYOFAMERICA.ORG

Optional Second E-Mail Address

VET.PARTY.AMERICANOTABAS@GMAIL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

WWW.VETERANSPARTYOFAMERICA.ORG

2. DATE

04 / 23 / 2014

3. FEC IDENTIFICATION NUMBER

C

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

DAVID H ISAKSON JR

Signature of Treasurer

David H Isakson Jr

Date

04 / 23 / 2014

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 Use Only

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

FEC FORM 1 (Revised 06/2012)

14031232891

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 _____

Candidate Party Affiliation Office Sought: House Senate 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 MAT (National State or subordinate) committee of the VPA (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	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

14031232892

Write or Type Committee Name

VETERANS' PARTY OF AMERICA

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

NONE

Mailing Address

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

TREASURER

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

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

DAVID H ISAKSON II

Mailing Address

9469 BEALON RD ME #4

MOSES LAKE

CITY

WA

STATE

98837

ZIP CODE

Title or Position

TREASURER

Telephone number

509-322-0472

14031232893

Full Name of Designated Agent

MARK A WILDER

Mailing Address

2493 ALTURAS CT

WEST SACRAMENTO

CA

95691

CITY

STATE

ZIP CODE

Title or Position

CHAIR PRO TEMPORE

Telephone number

207-673-7211

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.

PAY PAL

Mailing Address

2211 NORTH FIRST STREET

SAN JOSE

CA

95131

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

CHASE BANK

Mailing Address

323 S DIVISION ST

MOSES LAKE

WA

98837

CITY

STATE

ZIP CODE

14031232894

14031232895



Flat Rate Envelope

Apply Priority Mail Postage Here

U.S. POSTAGE
PAID
MOSES LAKE, WA
98837
APR 29, 14
AMOUNT
\$5.60
00025756-06



20643



1006

UNITED STATES POSTAL SERVICE®

USPS TRACKING #

9114 9012 3080 1581 5908 29

Label 400 Jan. 2013
7890-16-000-7948

EPI14H JAN 2011 Outer Dimension: 10 x 5

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
4/29/14

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark


Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

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

Other (Specify): Date of Receipt or Postmarked

 5/5/14
 PREPARER DATE PREPARED
 (8/2013)

96825215041