Only

STATEMENT OF

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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. Jawad Hashem Hakeem 2020 1427 Hervey Ave unit A ADDRESS (number and street) (Check if address is changed) North Chicago 60064 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS wlglaud7@gmail.com (Check if address is changed) Optional Second E-Mail Address wlglaud7@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00676908 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. Glaud, Wanda, , Ms, Type or Print Name of Treasurer Glaud, Wanda, , Ms, [Electronically Filed] 12 2018 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

Local 202-694-1100

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		rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE e 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. (Con information below.)	nplete the candidate			
Name Cand	e of lidate	Hakeem, Jawad, Hashem, ,				
	lidate Affiliati	on DEM Office Sought: House Senate Fresident	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand						
Part	y 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 co	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 s committee. (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	raising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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.	wo or more political			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

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Write or Type Committee N		<u> </u>
Jawad Hashe	m Hakeem 2020	
	ed Organization, Affiliated Committee, Joint Fundraising Representation	ative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STA	TE ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of	the person in possession of committee
Glaud,	Wanda, , Ms,	
Mailing Address	1919 Brookhill Way	
	Snellville	30078
Title or Position	CITY STATI	E ZIP CODE
Treasurer	Telephone number	803 476 - 5695
Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the commg., assistant treasurer).	nittee; and the name and address of
Full Name Glaud, of Treasurer	Wanda, , Ms,	
Mailing Address	1919 Brookhill Way	
	Snellville GA	A 30078
Title or Position , Treasurer	CITY STATE	
	Telephone number	803 476 5695

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit boxes o Name of Bank, Depos	sitory, etc.	ius, noius accounts, rents
safety deposit boxes o Name of Bank, Depos	or maintains funds.	ius, noius accounts, rents
safety deposit boxes of Name of Bank, Depos	er maintains funds. Sitory, etc. ETA BANK P.O BOX 2136	T8768
safety deposit boxes of Name of Bank, Depos	er maintains funds. Sitory, etc. ETA BANK P.O BOX 2136	
safety deposit boxes of Name of Bank, Depos	P.O BOX 2136 AUSTIN TX CITY STATE	
safety deposit boxes of Name of Bank, Depos	P.O BOX 2136 AUSTIN TX CITY STATE	
safety deposit boxes of Name of Bank, Depos	P.O BOX 2136 AUSTIN TX CITY STATE	
safety deposit boxes of Name of Bank, Depos	P.O BOX 2136 AUSTIN TX CITY STATE	
Name of Bank, Depos Mailing Address Name of Bank, Depos	P.O BOX 2136 AUSTIN TX CITY STATE	
safety deposit boxes of Name of Bank, Deposition MEMARING Address Name of Bank, Deposition Deposition Name of Bank, Deposition Deposition Name of Bank, Deposition Name of Bank, Deposition Deposition Name of Bank, Deposit	P.O BOX 2136 AUSTIN TX CITY STATE	