FEC FORM 1		STATEMEN ORGANIZA			PAGE 1 / 5
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Defeat I.O.					
ADDRESS (number a	nd street)	1161 Wayzata Blvd E #203			
(Check if a is changed	address				
is changed	)	Wayzata			55391
				STATE ▲	ZIP CODE
COMMITTEE'S E-MA	AIL ADDRE	SS			
(Check if a		defeatiopac@gmail.com	1		
is changed	<b>)</b>	Optional Second E-Mail Add	ress		
(Check if a is changed					
2. DATE 0.	3 / D 12				
3. FEC IDENTIFICATION NUMBER ► C C00699041					
4. IS THIS STATEM	MENT	NEW (N) OR	× AMENDED (A)		
I certify that I have e	examined th	is Statement and to the best o	of my knowledge and belief it i	is true, correct a	and complete.
Type or Print Name	of Treasurer	Einafshar, Amir, , ,			
Signature of Treasure	er Einafs	har, Amir, , ,	[Electronically Filed]	Date 03	/ D D / Y Y Y Y 14 2019
NOTE: Submission of			nay subject the person signing the N SHOULD BE REPORTED WI		he penalties of 2 U.S.C. §437g.
Office Use Only			For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEC F	orm 1 (Revised 02/2009) Page 2		
TYPE OF	COMMITTEE		
Candidat	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. (Complete the candidate information below.)		
Name of Candidate	L		
Candidate Party Affilia	tion Office Sought: House Senate President District		
(c) <b>X</b>	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate	Omar, Ilhan, , , , , , , , , , , , , , , , , , ,		
Party Co	mmittee:		
(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		
	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 Fun	draising 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.		
Cor	nmittees Participating in Joint Fundraiser		
1.	FEC ID number		
2.	FEC ID number		
3.	FEC ID number		
4.	FEC ID number		

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Page 3

Write or Type Committee Name

## Defeat I.O. PAC

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

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.				
Wholihan Full Name	, Daniel, , ,			
	PO Box 1182			
Mailing Address				

maning / taal 055				
5				
	Brighton		MI	48116
Title or Position		CITY	STATE	ZIP CODE
			Telephone number	517 896 9992

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	Einafshar, Amir, , ,
of Treasurer	
Mailing Address	3943 Meadowview Terrace
	$[ \  \  , \  \  , \  \  , \  \  , \  \  , \  \ $
	Saint Bonifacius         MN         55375
	CITY STATE ZIP CODE
Title or Position	Telephone number $\begin{vmatrix} 612 \\ -1 \end{vmatrix} = \begin{vmatrix} 599 \\ -1 \end{vmatrix} = \begin{vmatrix} 7114 \\ -1 \end{vmatrix}$
	Image:

Full Name of Designated Agent	Einafshar, Kevin, , ,
Mailing Address	1161 Wayzata Blvd E #203
	Wayzata
	CITY STATE ZIP CODE
Title or Position President	Telephone number     612     -     208     -     8676

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.

Sta	r Choice Credit Union	
Mailing Address	10750 France Ave S	
	Minneapolis	MN 55431
	CITY	STATE ZIP CODE
Name of Bank, Deposi	ory, etc.	
Mailing Address		
	CITY	STATE ZIP CODE

## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: