FEC

2017 - 08 - 21 - 03 - 00171926

Office

Use

Only

STATEMENT OF **ORGANIZATION**

FEC FORM 1 (Revised 06/2012)

			I CENTER
			20केन्द्रीपक १०५ मध्य र
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Angelo Yoshanna	h Scrigna Presid	ential Campaign	
ADDRESS (number and street)	13-3459 Kulas	Street	
(Check if address is changed)	[Pahoa] , , , ,		. HI 96778
	CITY		STATE ▲ ZIP CCDE ▲
COMMITTEE'S E-MAIL ADDRE	ESS	e in the second	 ,
(Check if address is changed)	langelo4usa20	20@gmail.com	
	Optional Second E-Mail A	Address	en de la companya de La companya de la co
	5 (2017)	742024:0109Sp0	t.com
	,		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	· ·
		AMENDED (A)	it is true, correct and complete.
	this Statement and to the be		And the second s

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:

Federal Election Commission Toll Free 800-424-9530

Local 202-694-1100

(d)	X	This committee is a or subordinate) committee of the Republican, etc.) Par	ty.
Polit	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is	s a
		Corporation Corporation w/o Capital Stock Labor Organization	l
		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 par committee. (i.e., nonconnected committee)	rty
		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)		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.	
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	36 0
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FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Page	Of:	

5(g)	or(h). Joint Fundraising	g Participant:	
	1.		FEC ID number
	2.		FEC ID number C
	3.		FEC ID number C
	4.		FEC ID number
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative, or Leadership PAC Sponsor
	Mailing Address		
	Relationship:	CITY A	STATE A ZIP CODE A
	Connected	Organization Affiliated Committee Joint	Fundraising Representative Leadership PAC Sponsor
8.	•	yelo Yoshannah Scrigna 1910 Yoshannah Scrigna 13-3459 Kula Street	a
	Maining Address	Pahoa	
	TITLE OR POSITION	CITY ▲	STATE ▲ ZIP CODE ▲
	President	,	elephone Number <u>424</u> -666-8-753
9.	Banks or Other Deposito safety deposit boxes or ma		the committee deposits funds, holds accounts, rents
	Name of Bank, Depository, etc.	<u></u>	<u> </u>
	Mailing Address		
		CITY ▲	STATE ▲ ZIP CODE ▲

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