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**FEC** 

Use

Only

## STATEMENT OF **ORGANIZATION**

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FORM 1 2013 MAY 2 Office: Use Only NAME OF Example: If typing, type (Check if name COMMITTEE (in full) is changed) over the lines. CENTER BIRCHER FOR CONGRESS 11125 PARK BLVD. #104-173 ADDRESS (number and street) (Check if address is changed) 3,3,7 CITY A ZIP CODE ▲ STATE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address MARK@MARKBIRCHER.ORG is changed) Optional Second E-Mail Address | MIKE@PAGWORKS.COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address WWW,BIRCHERFORCONGRESS.COM is changed) ·0 DATE FEC IDENTIFICATION NUMBER > IS THIS STATEMENT OR NEW (N) 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. MICHAEL MILLNER Type or Print Name of Treasurer 2 0 1 3 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: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

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5.

FEC Form 1 (Revised 02/2009)

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 Cand		MARK WILLIAM BIRCHER						
Cand Party	idate Affiliati	on REP Office State State President District 13						
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate								
Part	y Con	nmittee:						
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.						
Polit	tical A	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/Registrarit PAC.						
		In addition, this committee is a Leedership PAC. (Identify sponsor on line 6.)						
Joint	t Func	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.						
	Committees Participating in Joint Fundraiser							
	1.	FEC ID number C						
	2.	FEC ID number						
	3.	FEC ID number C						
	4.	FEC ID number						

•	National Type Committee Name  BIRCH	IEN FOR CONGRESS
6.	Name of Any Connected C	organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
L	<u> </u>	
L		
	Mailing Address	
		CITY STATE ZIP CODE
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons
7.	Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and position of the person in possession of committee
	Full Name MICHA	<u>ĘL MILLNĘR, , , , , , , , , , , , , , , , , , , </u>
	Mailing Address	2055 NW DIAMOND CREEK WAY
		JENSEN BEACH FL 34957 -
	Title or Position	CITY STATE ZIP CODE
	TREASURER	Telephone number 772 - 261 - 8100
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).
	Full Name MICHAE of Treasurer	EL MILLNER
	Mailing Address	2055 NW DIAMOND CREEK WAY
		JENSEN BEACH
		CITY STATE ZIP CODE
ì	Title or Position TREASURER	Telephone number 772 - 261 - 8100

FEC Form 1 (Revised	d 02/2009)		Page 4			
Full Name of Designated Agent						
Mailing Address						
	CITY	STATE	ZIP CODE			
Title or Position		ephone number				
Banks or Other Depositori safety deposit boxes or mair Name of Bank, Depository, e		he committee deposits funds,	holds accounts, rents			
PNC E	BANK N.A.					
Mailing Address	3639 NW FEDERAL HIGHWAY					
	JENSEN BEACH	FL 3	4957			
	CITY	STATE	ZIP CODE			
Name of Bank, Depository, etc.						
ليليل						
Mailing Address						
		با ليا ليب				
	CITY	STATE	ZIP CODE			

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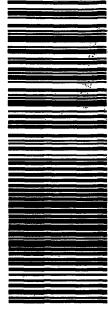
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## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): HEDEX 11/26/13 Next Business Day Delivery **Date of Receipt** 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 or Postmarked Other (Specify):

(8/2013)