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FEC FORM 1		STATEMEN ORGANIZA			PAGE 1 / 5	
1. NAME OF		(Check if name	Example:If typing, type	Office	Use Only	
COMMITTEE (ir		is changed)	over the lines.			
us term lim	Its	<u></u>				
		<u></u>				
ADDRESS (number a	nd street)	4061 azalea ct				
(Check if a is changed	address					
is changed	,	Mandenville		LA 70448		
		CITY A		STATE A	ZIP CODE	
COMMITTEE'S E-MA	AIL ADDRES	S				
(Check if a is changed	address d)	williehaddad@att.net				
-		Optional Second E-Mail Add	lress			
COMMITTEE'S WEB	address	RESS (URL)				
2. DATE 1	0 / D7	2019				
3. FEC IDENTIFIC	CATION NU	MBER ► C cc	00722041			
4. IS THIS STATEM	MENT	NEW (N) OR	AMENDED (A)			
I certify that I have e	examined this	s Statement and to the best	of my knowledge and belief it i	s true, correct and co	omplete.	
Type or Print Name	of Treasurer	haddad, Waleed, , ,				
Signature of Treasure	er <i>haddaa</i>	l, Waleed, , ,	[Electronically Filed]	Date 10	07 / Y Y Y Y 2019	
NOTE: Submission of	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 co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	n F I	EC FORM 1 Revised 06/2012)	

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F	EC Fo	Page 2
TYPE	OF C	COMMITTEE
Cano	didate	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 Candi		
Candie Party	date Affiliati	ion Office Sought: House Senate President District
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Candie		
Party	y Con	nmittee:
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Particular
Politi	ical A	Action Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or pa 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	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.
	Com	nmittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number
	3.	FEC ID number
	4.	FEC ID number

I

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

us term limits

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

Mailing Address				
		CITY	STATE	ZIP CODE
			Joint Fundraising Representa	tive Leadership PAC Sponsor
haddad, V	Valeed, , ,			
Full Name	4061 azalea ct			
Mailing Address				
	Mandenville			70448
Title or Position		CITY	STATE	ZIP CODE
I		1	Telephone number	i04 _ 250 _ 9088

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	haddad, Waleed, , ,
of Treasurer	
Mailing Address	4061 azalea ct
	Mandenville LA 70448 -
	CITY STATE ZIP CODE
Title or Position	
	Telephone number

Full Name of Designated Agent	Haddad, Waleed, , , 70448						
Mailing Address	4061 azalea ct						
	Mandenville	 			70448		
	CITY		S	STATE		ZIP CODE	
Title or Position	CITY		5	5TATE 5 1 504		ZIP CODE	

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.

BankP	lus		
Mailing Address	951 Memorial Blvd		
	Picayune	MS 39466	
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	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: F1N Transaction ID :

Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raisedin unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: