FEC MAIL GENTER 2017 MAR 30 AM 11:34

Committee Name:

Com Movement. C Λ If registered, FEC ID:

Today's Date:

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Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization-Unlimited Contributions

To Whom It May Concern:

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.

Respectfully submitted,

Treasurer's Name: Alentine NichAel 1. Treasurer

FEC FORM 1	STATEMENT OF ORGANIZATION	RECEIVED FEC MAIL CENTER 2017 MAR 30 AM 11: 34 Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	pe 12FE4M5
ZIP PAC MC		
ADDRESS (number and stre	(P. O. BOX 2)	
(Check if address is changed)	FORT LAUDERDALE	FL 33302 3722
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL AL (Check if addre is changed)	DDRESS (Please provide only one e-mail address) mickey@mickeyvalentin ess	ie.com
COMMITTEE'S WEB PAG (Check if addre is changed)	zippacmovement.com	,
2. DATE 03	28 2017	
3. FEC IDENTIFICATIO	ON NUMBER]
4. IS THIS STATEMENT		(A)
I certify that I have exami	ined this Statement and to the best of my knowledge and b	pelief it is true, correct and complete.
Type or Print Name of Tre	Michael L. Valentine	
Signature of Treasurer	72 VAL	Date 03 (28 2017)
NOTE: Submission of false,	erroneous, or incomplete information may subject the person sig ANY CHANGE IN INFORMATION SHOULD BE REPORT	

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	Office Use		For further information contact: Federal Election Commission	FEC FORM 1	-
L	Only	 ·	Toll Free 800-424-9530 Local 202-694-1100	(Revised 02/2009)	

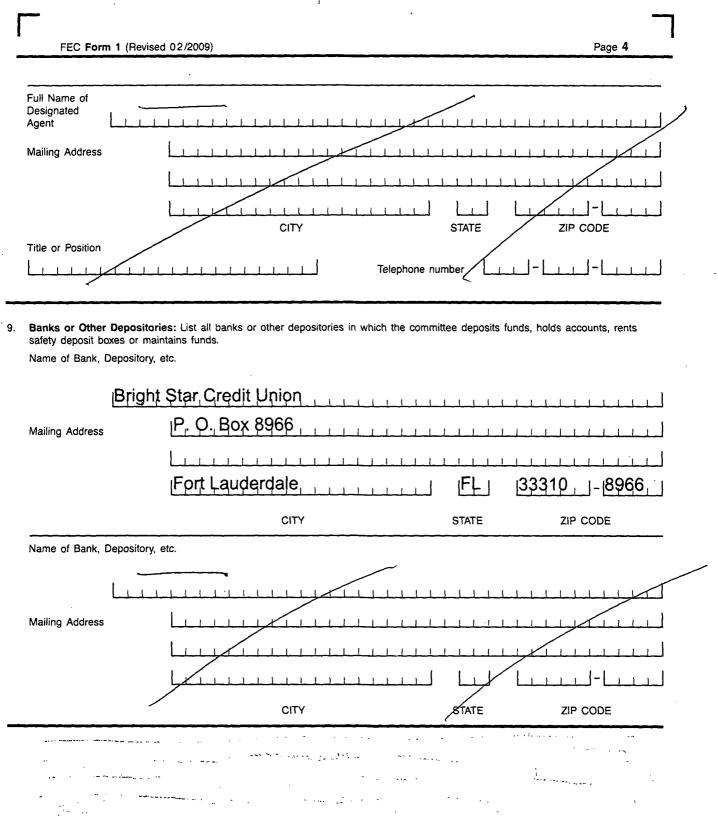
Γ	-					
	F	EC For	m 1 (Revised 02/2009) Page 2			
5.		DMMITTEE				
	Committee:					
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)			
	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
•						
Candidate Party Affiliation Office Sought: House Senate President District						
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate						
	Part	y Com	imittee:			
	(d)	D	This committee is a (National, State (Democratic, of subordinate) committee of the Republican, etc.) Party.			
	Polit	tical A	ction 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 Labo						
			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 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	t Fund	raising 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						
		2.				
		3.				
		4.				

FEC Form 1 (Revised 02/2009)

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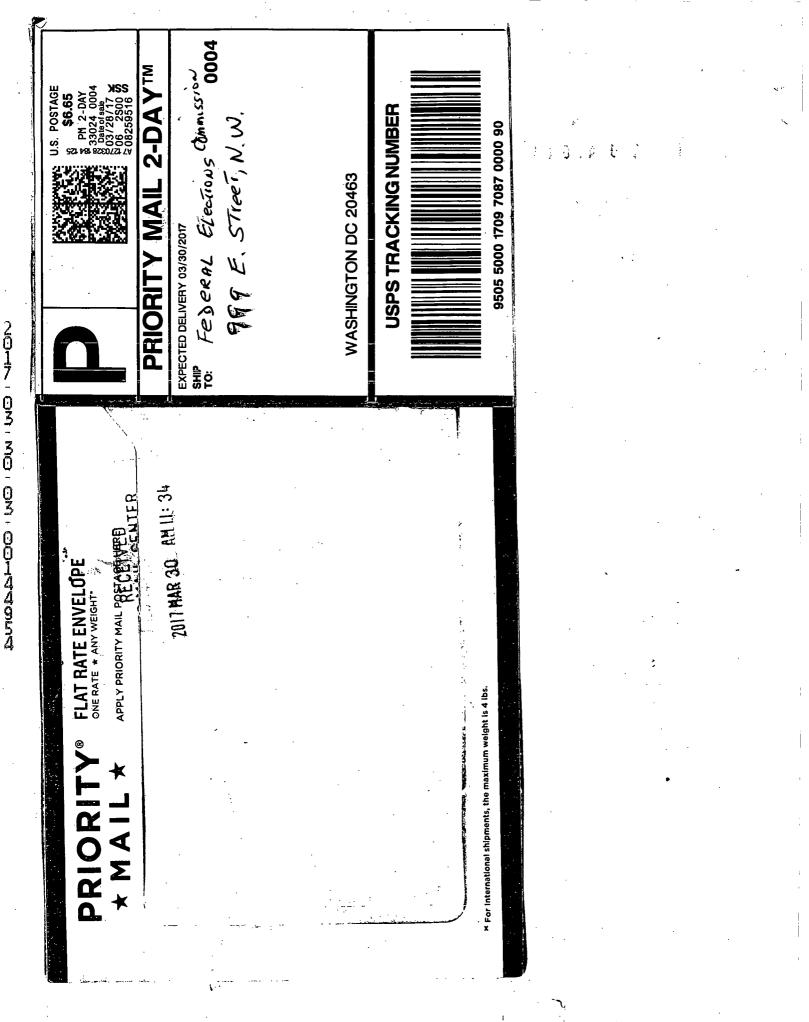
Write or Type Committee Name ZIP PAC MOVEMENT.COM Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6.)NF Mailing Address ZIP CODE CITY STATE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Relationship: Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee 7. books and records. Full Name Mailing Address Title or Position CITY STATE ZIP CODE Telephone number Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of 8. any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Michael L. Valentine	╶ ┨╶╸┨╴┨╴┨╶┨╶┨╶┨╶┨╸┨	
Mailing Address	2041 NE 51st CT. # A	┥╍┡╺┠╺┠╺┠╺┠╸┨╸┨	
	Fort Lauderdale	LILI [FL]	33308 3722
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number 561	929 - 2514



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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 Date of Receipt Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked USPS Priority Mail 3/28/17 Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): 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): 3/30/17 PREPARER DATE PREPARED (3/2015)