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FEC
FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Jimmy McMillan in 2016

ADDRESS (number and street) 1996 NOSTRAND AVE

(Check if address is changed)

Brooklyn NY 11210

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

dammrentparty@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

rentistoodammhigh.org

2. DATE 10 02 2015

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT NEW (N) OR 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.

Type or Print Name of Treasurer James E. McMillan III

Signature of Treasurer [Signature] Date 10 02 2015

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.

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5. 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 of Candidate JIMMY BENTIS TO O'LEARY HIGH MC M, NY

Candidate Party Affiliation REP Office Sought: House Senate President State NY District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (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 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/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising 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	<u>C</u> _____
2.	_____	FEC ID number	<u>C</u> _____
3.	_____	FEC ID number	<u>C</u> _____
4.	_____	FEC ID number	<u>C</u> _____

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Write or Type Committee Name

Jimmy McMillan in 2016

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for 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.

Full Name

JAMES E McMILLAN III

Mailing Address

1996 NOSTRAND AVE

BROOKLYN

NY

11210

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

347
~~347~~

623-9248

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 of Treasurer

JAMES E McMILLAN III

Mailing Address

1996 NOSTRAND AVE

BROOKLYN

NY

11210

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

347

623-9248

1-800-541-9000

Full Name of Designated Agent

JAMES E McMILLAN III

Mailing Address

1996 NOSTRAND AVE

Brooklyn

CITY

NY

STATE

11210-

ZIP CODE

Title or Position

Treasurer

Telephone number

347-623-9248

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.

TD BANK

Mailing Address

1715 Bedford Ave

Brooklyn

CITY

NY

STATE

11225-

ZIP CODE

Name of Bank, Depository, etc.

TD BANK

Mailing Address

1715 Bedford Ave

Brooklyn

CITY

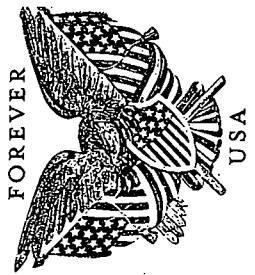
NY

STATE

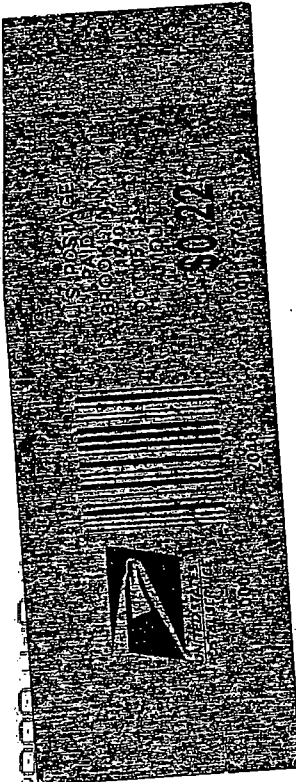
11225-

ZIP CODE

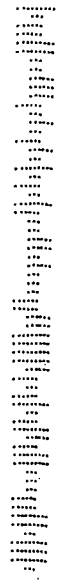
NOT FOR CIRCULATION



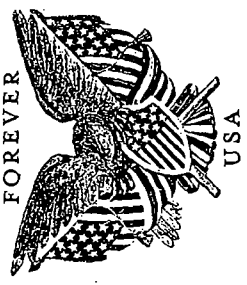
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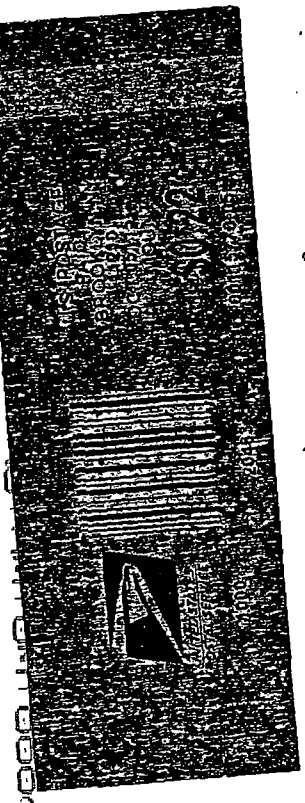
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20543



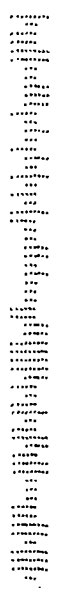
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N.Y.C. 10009



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999 E Street, N.W.
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<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER

10/13/15
 DATE PREPARED

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