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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

ROBERT LEE PRESIDENT

ADDRESS (number and street) P.O. BOX 4371

(Check if address is changed)

MOUNT EAGLE

VA

22303 - 0371

CITY

STATE

ZIP CODE

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

(Check if address is changed)

robertlee@systrolinternational.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.systrolinternational.com

2. DATE 03rd 17th 2011

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 ROBERT LEE

Signature of Treasurer *Robert Lee*

Date 03rd 17th 2011

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 contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

AMENDED JUNE 24, 2011 R.L.

11030614976

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 ROBERT LEE

Candidate Party Affiliation IND Office Sought: House Senate President State VA
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 NAT (National, State or subordinate) committee of the IND (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. THE INDEPENDENCE PARTY FEC ID number C
2. THE PAC FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

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Write or Type Committee Name

ROBERT LEE PRESIDENT

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

THE INDEPENDENCE PARTY

Mailing Address

P.O. BOX 4371

MOUNT EAGLE

CITY

VA

STATE

22303 - 0371

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

ROBERT LEE

Mailing Address

P.O. BOX 4371

MOUNT EAGLE

CITY

VA

STATE

22303 - 0371

ZIP CODE

CANDIDATE

Telephone number

703 - 915 - 3418

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

ROBERT LEE

Mailing Address

P.O. BOX 4371

MOUNT EAGLE

CITY

VA

STATE

22303 - 0371

ZIP CODE

Title or Position

TREASURER

Telephone number

703 - 915 - 3418

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Full Name of Designated Agent

ROBERT LEE

Mailing Address

P.O. BOX 4371

MOUNT EAGLE

CITY

VA

STATE

22303

ZIP CODE

0371

Title or Position

CAMPAIGN MANAGER

Telephone number

703

915

3418

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.

NAVY FEDERAL CREDIT UNION

Mailing Address

FOLLIN LANE

VIENNA

CITY

VA

STATE

22180

ZIP CODE

4907

Name of Bank, Depository, etc.

CITIBANK

Mailing Address

ONE CITIBANK DRIVE

SAN ANTONIO

CITY

TX

STATE

78245

ZIP CODE

11030614979

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.

11030614980

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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

[Signature]
 PREPARER
 (3/2005)

6/24/11
 DATE PREPARED