## 150m - 140 - 2997

**FEC** FORM 1

Office

Use

Only

## STATEMENT OF **ORGANIZATION**

FEDERAL ELECTION
COMMISSION
PUBLIC OFFICE
DIVISION

2015 MAR IS

|  |  | Off 19 PH 12: 13               |
|--|--|--------------------------------|
| NAME OF     COMMITTEE (in full)            | (Check if name Example: If typing, type is changed) over the lines.  | 12FE4M5                        |
| SHOS MUSTC                                 | COMMITTEE TO ELECT   | SHO NUHAMMAD                   |
| FOR PRESTO                                 | ENT  |                                |
| ADDRESS (number and street)                | P.O. BOX 34272   |                                |
| (Check if address is changed)              |  |                                |
| o onlinger,                                | H,0,05,T,0,N,  | TX 77238 - 1 ZIP CODE ▲        |
| COMMITTEE'S E-MAIL ADDRI                   | ESS  | . 1                            |
| (Check if address is changed)              | SHOSMUSIC BROCKTMAIL   | ·COM                           |
|  | Optional Second E-Mail Address   | :.<br><u></u>                  |
| 0014477550 WED DIOS 15                     | 200000 (101)   |                                |
| COMMITTEE'S WEB PAGE AD  (Check if address | DDHESS (UHL)   |                                |
| is changed)                                |  |                                |
| 2. DATE 02                                 | 3,2015   |                                |
| 3. FEC IDENTIFICATION N                    | UMBER ► C60571653  | •                              |
| 4. IS THIS STATEMENT                       | NEW (N) OR AMENDED (A)   |                                |
|  | this Statement and to the best of my knowledge and belief it   | is true, correct and complete. |
| Type or Print Name of Treasure             | She Mhammad  | Date 02 13 20 15               |
| NOTE: Submission of false, error           | neous, or incomplete information may subject the person signing t ANY CHANGE IN INFORMATION SHOULD BE REPORTED W | -                              |

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

FEC FORM 1

(Revised 06/2012)

| TYPE           | OF C               | OMMITTEE   |  |  |  |
|----------------|--------------------|--|--|--|--|
| Can            | 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<br>Candi  |                    | Sho Muhammad   |  |  |  |
| Candi<br>Party | idate<br>Affiliati | on Political Party Sought: House Senate President District   |  |  |  |
| (c)            |                    | This committee supports/opposes only one candidate, and is NOT an authorized committee.  |  |  |  |
| Name<br>Candi  |                    |  |  |  |  |
| Part           | v Con              | nmittee:   |  |  |  |
| (d)            |                    | This committee is a MA (National, State or subordinate) committee of the Political Republican, etc.) Party.  |  |  |  |
| Polit          | ical A             | ction Committee (PAC):   |  |  |  |
| (e)            | €                  | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:  |  |  |  |
| (0)            |                    |  |  |  |  |
|                |                    | 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          | t Func             | Iraising 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                | mittees Participating in Joint Fundraiser  |  |  |  |
|                | 1.                 | FEC ID number C  |  |  |  |
|                | 2.                 | FEC ID number C  |  |  |  |
| ٠.             | 3.                 |  |  |  |  |
|                | 4.                 |  |  |  |  |

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|--|--|--------------------------------|
| Write or Type Committee Na                                     |  |                                |
| 6. Name of Any Connecte  | d Organization, Affiliated Committee, Joint Fundraising Representative, of                       | r Leadership PAC Sponsor       |
|  |  |                                |
|  |  |                                |
| Mailing Address  |  |                                |
|  |  |                                |
|  |  |                                |
|  | CITY STATE   | ZIP CODE                       |
| ি প্রশ্নর্যাonship: Conne                                      | cted Organization Affiliated Committee Joint Fundraising Representati                            | ve Leadership PAC Sponsor      |
| <ol> <li>Custodian of Records: I books and records.</li> </ol> | dentify by name, address (phone number optional) and position of the per                         | son in possession of committee |
| Full Name Shi  | o, Muhammad  | <u> </u>                       |
| Mailing Address  | P.O.BOX 38272  |                                |
|  |  |                                |
|  | HOUSTON IX   | 17.7.23.81-                    |
| Title or Position  | CITY STATE   | ZIP CODE                       |
| Durector   | Telephone number   | 32 - [23,5] - [64,6,0          |
| 8. <b>Treasurer:</b> List the name any designated agent (e.g   | and address (phone number optional) of the treasurer of the committee; a., assistant treasurer). | and the name and address of    |
| Full Name 516  | o, Muhammad  |                                |
| Mailing Address  | P.O. BOX 34272   |                                |
|  |  |                                |
|  | HOUSTON,   | 7.72381-                       |
| Title or Position  | CITY STATE   | ZIP CODE<br>81-2.351-16.460    |

150M - 140 - 3000

1503 140 3001 Houston, Texts 17238 P.O. Box 38272

MORTH HOLDINGT NY 27 11 MAR 2015 FM 2 L

Federal Election 999 E. amplantalahampathampahis talida

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PUBLIC DIVISION

2015 MAR 16 PM 12: 15

## Federal Election Commission

| vit was received.        |
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| Date of Receipt          |
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