

Reset Form

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD
 510 EAST 12TH, SUITE 1A
 DES MOINES, IA 50319
 Report Fax Line: (515)281-4073
 www.iowa.gov/ethics

Form	DR-CO
Registration of Conduit Organization	
For office use only	
Indexed	_____
Audited	_____
Checked	_____
Computer	_____

Registration of Conduit Organization

Conduit Organization Information:

FYP, LLC, d/b/a MyChange	
Conduit Organization Name	
PO Box 7748	Albuquerque, NM 87194
Mailing Address	City, State, Zip Code
eli@mychange.com	505-440-1996
Email Address (Optional)	Area Code & Telephone No.
Eli Il Yong Lee	
Contact Name	
PO Box 7748	Albuquerque, NM 87194
Mailing Address	City, State, Zip
eli@mychange.com	505-440-1996
Email Address	Area Code & Telephone Number

- Criteria to use this form:
1. Organization collects only earmarked contributions for distribution to designated committees.
 2. Organization makes no independent decisions concerning distribution of contributions received.
 3. Organization provides all required information to recipient committees for disclosure purposes.

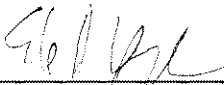
When to file:

This form must be filed with the Board on or before the organization collects and transfers funds to Iowa committees. The failure to timely file this form leads to the imposition of civil penalties and the intentional failure to file the form may lead to additional civil and criminal sanctions.

For all questions regarding the use of this form, please call the Iowa Ethics and Campaign Disclosure Board office at (515) 281-3489.

Statement of Affirmation:

I, Eli Il Yong Lee affirm that the information reported above is accurate and the conduit organization falls within the required criteria. I understand that if the conduit organization ceases to comply with the criteria it is subject to all disclosure laws and subject to Board actions.



 Signature

9-3-15

 Date