PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Unifying America Political Action Committee 211 Westwood Avenue ADDRESS (number and street) (Check if address is changed) Staten Island 10304 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS unifyingamerica50@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00577213 FEC IDENTIFICATION NUMBER > 3. X 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. Sadia Malik Type or Print Name of Treasurer Sadia Malik [Electronically Filed] 05 2015 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
TYP	E OF C	OMMITTEE	1 ago 2
Car	ndidate	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. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate y Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	/Damaau-+!-
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected 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 secommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

EEC Form 1 (Devised C	22/2000)	Page 3
FEC Form 1 (Revised C		Page 3
	a Political Action Committee	
	organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
NONE		,
NONE		
Mailing Address		
	CITY STATE Z	IP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
. Custodian of Records: Iden	tify by name, address (phone number optional) and position of the person in posso	ession of committee
books and records.		
Sadia Mali Full Name	k 	.
Mailing Address	211 Westwood Avenue	
Walling Address		
	Staten Island NY 10304	. -
Title or Position	CITY STATE Z	P CODE
	Telephone number	
 Treasurer: List the name and any designated agent (e.g., a 	d address (phone number optional) of the treasurer of the committee; and the namessistant treasurer).	e and address of
Full Name Sadia Malik	S	
of Treasurer		
Mailing Address	211 Westwood Avenue	
	Staten Island NY 10304	
Title or Position	CITY STATE ZI	P CODE
	Telephone number	
1		

	m 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Sobia Sheikh	
Mailing Address	25 Braisted Avenue	
	Staten Island CITY STATE	ZIP CODE
Title or Position	Telephone number]
		, holds accounts, rents
	Northfield Bank 3227 Richmond Avenue	
Mailing Address		1
	Staten Island NY 10	0312
	Staten Island NY 10	0312 ZIP CODE
Name of Bank, [CITY STATE	
Name of Bank, [CITY STATE	
Name of Bank, E	CITY STATE Depository, etc.	
	CITY STATE Depository, etc.	
	CITY STATE Depository, etc.	