FEC

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STATEMENT OF

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ORGANIZATION FORM 1 FEGMAJL CENTER 1. NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Delaware North Companies, Inc. Political Action Committee Fountain Plaza ADDRESS (number and street) (Check if address is changed) ffalo CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) isnoke@dncinc.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) www.delawarenorth.com (Check if address is changed) DATE **FEC IDENTIFICATION NUMBER** 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. Charles⊿E. Moran, Jr. Type or Print Name of Treasurer 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.

> For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

FEC Form 1	(Revised 02/2009)	Page 2				
TYPE OF COMMITTEE						
Candidate Co	ommittee:	·				
(a) Th	is committee is a principal campaign committee. (Complete the candidate information below.)				
• • • • • • • • • • • • • • • • • • • •	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate						
Candidate Party Affiliation	Office Sought: House Senate President	State District				
(c) Th	is committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
Party Commi	ttee:					
(d) Tr	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Political Action	on Committee (PAC):					
(e) X Th	nis committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a				
_ 5	Corporation Corporation w/o Capital Stock	Labor Organization				
Γ		_				
<u>-</u>	Membership Organization Trade Association	Cooperative				
.α Γ1 π	In addition, this committee is a Lobbyist/Registrant PAC.					
	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:						
	is committee collects contributions, pays fundraising expenses and disburses net proceeds for temperatures and disburses net proceeds for temperatures and disburses net proceeds for temperatures.					
	is committee collects contributions, pays fundraising expenses and disburses net proceeds for t mmittees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political				
Committees Participating in Joint Fundraiser						
1		e kas ja spanjasjas ja s				
1						
2.	FEC ID number					
3.	FEC ID number					
4.	FEC ID number	aga taga daga daga daga daga daga daga d				

EEC Form 1 / Doving	-d 00/0000)	Poro 3				
FEC Form 1 (Revise		Page 3				
Write or Type Committee Name						
Delaware North Companies, Inc. Political Action Committee						
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor						
Delaware North Companies, Inc.						
Mailing Address	40					
	Buffalo 1 1 1 1 NY 142	202				
	CITY STATE	ZIP CODE				
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	eadership PAC Sponsor				
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the person in p	possession of committee				
Full Name Raja	at R. Shah	11111				
Mailing Address	40 Fountain Plaza					
-						
•	Buffalo, NY 142	.02				
Title or Position	CITY STATE	ZIP CODE				
Assistant Trea	Surer Telephone number [716] - [858 [5000				
Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; and the g., assistant treasurer).	name and address of				
Full Name of Treasurer	arles E. Moran, Jr.					
Mailing Address	40 Fountain Plaza					
	Buffalo NY 142	ZIP CODE				
Title or Position	1716					
Treasurer	Telephone number 716	858, - 5000 ,				

	m 1 (Revised	02/2009)	<u>.</u>	. Page 4
Full Name of Designated Agent	Rajat F	Ŗ. Shah		<u></u>
Mailing Address		40 Fountain Plaza	1.	
			<u> </u>	
		Buffalo : CITY	NY	14202
Title or Position [Assistant]	Treasurer	Telephone r	number [716	6[858[5000
safety deposit b	oxes or main	· •	nittee deposits t	unds, holds accounts, rents
Name of Bank,		•		
	JР Мо	rgan,Chase Bank, , , , , , , , , , , , , , , , , ,		
Name of Bank, Mailing Address	JР Мо	•		
	JР Мо	rgan,Chase Bank, , , , , , , , , , , , , , , , , ,	INY J	14643, -
	JР Мо	rgan, Chase Bank [One Chase Square	NY	14643 -
	JP Mo	rgan, Chase Bank [One Chase Square 	L	Calabarata Cabaratan
Mailing Address	JP Mo	rgan, Chase Bank [One Chase Square 	L	Calabarata Cabaratan
Mailing Address	JP Mo	rgan, Chase Bank [One Chase Square 	L	Calabarata Cabaratan
Mailing Address	JP Mo	rgan, Chase Bank	L	Calabarata Cabaratan
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No Postmark					
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Received from Senate Public Records Office	Date of Receipt				
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