FEC FORM 1

3.

Type or Print Name of Treasurer

Signature of Treasurer

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STATEMENT OF **ORGANIZATION** Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL 555 11th St NW ADDRESS (number and street) Suite 401 (Check if address is changed) Washington 20004 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS info@iadlc.org (Check if address is changed) Optional Second E-Mail Address bpalumbo52@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00299396 FEC IDENTIFICATION NUMBER X OR IS THIS STATEMENT NEW (N) 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.

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530
Offine			Local 202-694-1100

Palumbo, Benjamin, L.,

Palumbo, Benjamin, L.,,

2024

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Date

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	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						
	Candidate Office Party Affiliation Sought: House Senate President	State					
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate						
	Party Committee:						
	(d) This committee is a (National, State or subordinate) committee of the Republican, e	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 Org	anization					
	Membership Organization Trade Association Cooperation	/e					
	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 committee. (i.e., nonconnected committee)	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.)						
	(g) This committee is an independent expenditure-only political committee (Super PAC).						
	In addition, this committee is a Lobbyist/Registrant PAC.						
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	Joint Fundraising Representative:						
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or a committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political					
	(j) 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						

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Ν	rite	or	Type	Committee	Name	
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6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor								
	NONE								
	Mailing Address								
			CITY A		STATE ▲	ZIP CODE ▲			
	Relationship: Connected	Organization Affi	liated Organization	Joint Fundraising	Representative	Leadership PAC Sponso			
						_			
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7.	Custodian of Records: Identi books and records.	ry by name, address	(pnone number optioi	nai) and position c	or the person in p	ossession of committee			
		Benjamin, L., ,							
	Full Name								
	Mailing Address	1204 South Oakcres	t Road						
		Arlington			VA	22202			
			CITY ▲		STATE ▲	ZIP CODE ▲			
	Title or Position ▼								
	Treasurer			Telephone num	nber				
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 Palumbo, E	Benjamin, L., ,							
	of Treasurer								
	Mailing Address	1204 South Oakcres	st Road						
		Arlington			VA	22202			
			CITY ▲		STATE ▲	ZIP CODE ▲			
	Title or Position ▼								
	Treasurer		I	Telephone num	nber	- -			
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	Full Name of Designated Agent		
	Mailing Address		
	Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position		
		Telephone number	
-		Depositories: List all banks or other depositories in which the committee deposits f xes or maintains funds.	unds, holds accounts, rents
	Name of Bank, D	Depository, etc.	
		United Bank	
	Mailing Address	1667 K Street, NW	
		Washington DC	20006
		CITY ▲ STATE ▲	ZIP CODE ▲
	Name of Bank, D	Depository, etc.	
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲