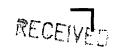
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FEC FORM 1

STATEMENT OF **ORGANIZATION**



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				Office Use (prily Asia)	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	THE CENT	
Daylin for Congress			<u>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </u>		
		1111111			
ADDRESS (number and street)	PO BOX 228				
(Check if address					
L is changed)	Jenkintown PA 19046				
		CITY	STATE	ZIP CODE	
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one e-	mail address)	•		
(Check if address	info@yotedaylin.co	<u>m </u>	1 1 1 1 1 1		
is changed)					
COMMITTEE'S WEB PAGE AD	DRESS (URL)			× .	
(Check if address	www.yotedaylin.com	n	1 1 1 1 1 1		
is changed)			<u> </u>		
2. DATE 4 1	2013.				
3. FEC IDENTIFICATION N	JMBER C				
		Open de menteur et de manuel de manuel de met et de manuel de met et de manuel de manuel de manuel de manuel d			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
I certify that I have examined the	nis Statement and to the best	of my knowledge and belief it	t is true, correct a	and complete.	
Type or Print Name of Treasure	, Christopher Massi	cotte			
	4, m_			/ 6 * 5 / X * 7 * 7 * 7	
Signature of Treasurer	14.90 8		Date 0.9	01 2013	
NOTE: Submission of false, errone	BOUS, or incomplete information of			he penalties of 2 U.S.C. §437g.	
Office Use Only		For further information of Federal Election Commissing Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)	

FEC F	orm 1 (Revised 02/2009)	Page 2
5. TYPE OF	COMMITTEE	
Candidat	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. (Co information below.)	mplete the candidate
Name of Candidate	Daylin,Leach , , , , , , , , , , , , , , , , , , ,	<u> </u>
Candidate Party Affilia	ion DEM. Office Sought: House Senate President	State PA District 13
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	mmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected 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 committee. (i.e., nonconnected committee)	segregated 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.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number C	
2.	FEC ID number C	
3.	FEC ID number C	
4.		

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FEC Form 1 (Re			Page 3
Daylin for Congre			
	ected Organization, Affiliated Committe	ee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
•	, , , , , , , , , , , , , , , , , , , ,		
Mailing Address			
			<u> </u>
	CITY	STAT	E ZIP CODE
Relationship: Co	onnected Organization Affiliated Comm	nittee Joint Fundraising Repres	entative Leadership PAC Sponsor
Custodian of Record books and records.	ds: Identify by name, address (phone nu	mber optional) and position of th	ne person in possession of committee
Full Name			
Mailing Address			
			J
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	
	ame and address (phone number optic t (e.g., assistant treasurer).	onal) of the treasurer of the commi	ttee, and the name and address of
Full Name of Treasurer	nristopher Massicotte		 - - - - - - - - - - - - -
Mailing Address	PO Box 228		
	Jenkintown CITY	PA STATE	19406 ZIP CODE
Title or Position			
Treasurer		Telephone number	<u> 610 </u>

9.

FEC Form 1 (Revise	d 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position	·	Telephone number	لـــا-لـنـا

Banks or Other Depositor safety deposit boxes or mai	ies: List all banks or other depositories in wh ntains funds.	ich the committee deposits	funds, holds accounts, rents
Name of Bank, Depository,	etc.		
PNC B	ank, , , , , , , , , , , , , , , , , , ,		
Mailing Address	1600 Market Street		
	Philadelphia	PA PA	[19103, ,]-[, , , ,
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
1			
Mailing Address	1		
· ·	1		
•			
	СІТҮ	STATE	ZIP CODE

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confi	rmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	·
No Postmark	
Overnight Delivery Service (Specify): Fed &	Shipping, Date
Next Busine	ss Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
R	4/2/13
(3/2005)	DATE PREPARED