FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Fairness PAC 137 Montague St Num 371 ADDRESS (number and street) (Check if address is changed) Brooklyn 11201 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS admin@billdeblasio.com (Check if address is changed) Optional Second E-Mail Address tate@billdeblasio.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 25 2018 C00683664 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. Buery, Richard, , , Type or Print Name of Treasurer Buery, Richard, , , [Electronically Filed] 07 25 2018 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

Local 202-694-1100

Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	FEC	Form 1 (Revised 02/2009)	Page 2
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Candidate Candidate Candidate Candidate Candidate Candidate Party Affiliation Committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (n) This committee is a committee of subordinate or subordinate or subordinate or subordinate. Political Action Committee (PAC): (n) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization or line 6.) Its committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or promittee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC. In addition, this commi			
Name of Candidate Candidate Party Affiliation City This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (d) This committee is a	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
Candidate Party Affiliation Office Sought: House Senate President District Co This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (d) This committee is a	(b)		nplete the candidate
Party Affiliation			
Party Committee: (d) This committee is a (National, State or subordinate) committee of the Republican, etc.) F Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization Corporation Corporation No 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 segregated fund or procommittee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC. 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: (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser 1. FEC ID number C FEC ID number C		*****	
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2. FEC ID number			
3. FEC ID number		FEC ID number	
4.			

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Write or Type Committee No		. ago 🐱
Fairness PAC		
	d Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the person i	n possession of committee
	nan, Daniel, , ,	
Full Name	110 Livingston St #2B	
Mailing Address		
	Brooklyn , NY , 112	201
	Dissilyii III III III III III III III III III	
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
3. Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the committee; and thg., assistant treasurer).	ne name and address of
Full Name Buery, of Treasurer	Richard, , ,	
Mailing Address	16 7th Ave	
	Brooklyn NY 112 CITY STATE	217 ZIP CODE
Title or Position		
	Telephone number	- [

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Full Name of Designated Agent	Hausman, Daniel, , ,	
Mailing Address	110 Livingston St #2B	
	Brooklyn NY 1120	I
Title or Position	CITY STATE	ZIP CODE
THE OF POSITION		-
Banks or Other safety deposit bo Name of Bank, I	r Depositories: List all banks or other depositories in which the committee deposits funds, ho oxes or maintains funds. Depository, etc.	olds accounts, rents
safety deposit bo Name of Bank, I	oxes or maintains funds. Depository, etc. Amalgamated Bank ,275 7th Ave	olds accounts, rents
safety deposit bo	oxes or maintains funds. Depository, etc. Amalgamated Bank ,275 7th Ave	olds accounts, rents
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