Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Stark Leadership PAC 2215 Demington Ave NW ADDRESS (number and street) (Check if address is changed) Canton 44708 OH CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS jason@starkleadershippac.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00818047 FEC IDENTIFICATION NUMBER 3. 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. Wise, Jason, , , Type or Print Name of Treasurer Wise, Jason, , , [Electronically Filed] 06 2022 Signature of Treasurer Date 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: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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TYPE OF COMMITTEE:			
Candidate Committee:			
(a) This committee is a principal campaign committee. (Cor	nplete 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	State President District		
(c) This committee supports/opposes only one candidate, a	nd is NOT an authorized committee.		
Name of Candidate			
Party Committee:			
(d) This committee is a (National, State or subordinate) co	(Democratic, Republican, 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 Corpora	tion w/o Capital Stock Labor Organization		
Membership Organization Trade A	ssociation Cooperative		
In addition, this committee is a Lobbyist/Regis	trant PAC.		
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated function committee. (i.e., nonconnected committee)			
In addition, this committee is a Lobbyist/Regis	trant PAC.		
In addition, this committee is a Leadership PA	.C. (Identify sponsor on line 6.)		
(g) This committee is an independent expenditure-only political committee (Super PAC).			
In addition, this committee is a Lobbyist/Regis	trant PAC.		
This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).			
In addition, this committee is a Lobbyist/Regis	trant PAC.		
Joint Fundraising Representative:			
(i) This committee collects contributions, pays fundraising e committees/organizations, at least one of which is an at	expenses and disburses net proceeds for two or more political uthorized committee of a federal candidate.		
(1)	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.	C		

6. Na		ership PAC cted Organization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
6. Na	nme of Any Conne	•	or Leadership PAC Sponsor
N L	IONE	cted Organization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
L			
Ma	ailing Address		
Ma	ailing Address		
			I I-I
		CITY ▲ STATE ▲	ZIP CODE ▲
_			
Re	elationship: Cor	nnected Organization Affiliated Organization Joint Fundraising Representati	ve Leadership PAC Sponso
	ustodian of Recordsoks and records.	s: Identify by name, address (phone number optional) and position of the person i	in possession of committee
	Wis	se, Jason, , ,	
Fu	II Name		
Ma	ailing Address	2215 Demington Ave NW	
		Canton	44708
		CITY ▲ STATE ▲	ZIP CODE ▲
Tit	le or Position ▼		
L	reasurer	Telephone number	353 - 3554
		ame and address (phone number optional) of the treasurer of the committee; a (e.g., assistant treasurer).	and the name and address of
Fu	II Name Wis	se, Jason, , ,	
of	Treasurer		
Ma	ailing Address	2215 Demington Ave NW	
		Canton	44708
Tit	le or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	reasurer		30 _ 353 _ 3554

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Full Name of Designated Agent					
Mailing Address					
Title or Position ▼	CITY ▲ STA	TE ▲ ZIP CODE ▲			
	Telephone number				
Banks or Other Depositori safety deposit boxes or main	es: List all banks or other depositories in which the committee dentains funds.	posits funds, holds accounts, rents			
Name of Bank, Depository, etc.					
Premie	r Bank				
Mailing Address	6141 Whipple Ave NW				
	North Canton	0H 44720			
	CITY ▲ STAT	TE ▲ ZIP CODE ▲			
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲ STA	TE ▲ ZIP CODE ▲			