Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Erick Aguilar Congressional Race Candidate 13450 Stanton Drive ADDRESS (number and street) (Check if address is changed) Jacksonville  $\mathsf{FL}$ 32225 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dr.erick.aguilar@gmail.com (Check if address is changed) Optional Second E-Mail Address erick@erickforcongress.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.erickforcongress.com (Check if address is changed) DATE 2019 C00716399 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. Bennett, Frank, , , Type or Print Name of Treasurer Bennett, Frank, , , [Electronically Filed] 07 16 2021 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

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		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • 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. (Con information below.)	nplete the candidate
Nam Cand	e of didate	Aguilar, Erick, Javier, ,	
	didate / Affiliation	on REP Office Sought: X House Senate President	State FL District 04
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	(Danis
(d)		(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
		Corporation Wo 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 s committee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee N	lame	
Erick Aguilar	Congressional Race Candidate	
	ed Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
NONE		 
		<u> </u>
Mailing Address		
Mailing Address		
		1
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Represent	tative Leadership PAC Sponsor
	Identify by name, address (phone number optional) and position of the p	person in possession of committee
books and records.		
Benne Full Name	ett, Frank, , ,	
Mailing Address	13450 Stanton Drive	
	Jacksonville FL	32225
Title or Position	CITY STATE	ZIP CODE
<sub>I</sub> Treasurer	1 1	208   308   9205
	Telephone number	
3. <b>Treasurer:</b> List the name any designated agent (e.g.	e and address (phone number optional) of the treasurer of the committee	e; and the name and address of
	tt, Frank, , ,	
Full Name Bennet of Treasurer	ц, гіапк, , ,	
Mailing Address	13450 Stanton Drive	
	Jacksonville   FL	32225
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	208

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Full Name of Designated Agent	Robayo, John, , ,	<u> </u>				
Mailing Address	13450 Stanton Drive					
	Jacksonville FL 32225 CITY STATE Z					
Title or Position Assistant Treas	urer	37   -   8264				
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.						
	Wells Fargo					
Mailing Address						
		I				
	Jacksonville FL 32225					
		ZIP CODE				
Name of Bank,	CITY STATE Z	ZIP CODE				
Name of Bank,	CITY STATE Z	ZIP CODE				
Name of Bank, Mailing Address	CITY STATE Z Depository, etc.	ZIP CODE				
	CITY STATE Z Depository, etc.	ZIP CODE				
	CITY STATE Z Depository, etc.	ZIP CODE				