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PAGE 1 / 5 🗕

STAT	EMEN	IT OF
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FEC FORM 1	STATEMEN ORGANIZA		Office	PAGE 1 / 5
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
	• PAC			
ADDRESS (number and street)	225 Park Ave South			
 (Check if address is changed) 				
	New York └────────────────────────────────────		NY 10003 STATE ▲	
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)	kristina.raevska@stvinc.com			
	Optional Second E-Mail Add	ress		
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)			
2. DATE 01	26 ^Y Y Y Y Y 2024			
3. FEC IDENTIFICATION N	NUMBER ► C coo	0420125		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined	this Statement and to the best of	of my knowledge and belief it i	s true, correct and co	omplete.
Type or Print Name of Treasu	rer Butcher, Thomas, , ,			
Signature of Treasurer But	cher, Thomas, , ,		Date 01	27 / Y Y Y Y 2024
NOTE: Submission of false, erro	neous, or incomplete information m ANY CHANGE IN INFORMATI	nay subject the person signing th ON SHOULD BE REPORTED V		nalties of 52 U.S.C. §30109
Office Use Only		For further information con Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	n F	EC FORM 1 Revised 06/2012)

FE	C Form 1	(Revised 03/2022)	Page 2
5.	TYPE OF	F COMMITTEE:	
	Candida	ate Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete th information below.)	e candidate
	Name c Candida		
	Candida Party A		State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candi		
	Party Co	ommittee: This committee is a (National, State (Democratic or subordinate) committee of the Republican,	c, , etc.) Party
	Political	Action Committee (PAC):	
		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
		Corporation Corporation w/o Capital Stock	Organization
		Membership Organization Trade Association Coopera	ative
		In addition, this committee is a Lobbyist/Registrant PAC.	
		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party

Joint Fundraising Representative:

(g)

(h)

(i) 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.
 (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.
 2.

This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Lobbyist/Registrant PAC.

This committee is an independent expenditure-only political committee (Super PAC).

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

	FEC Form 1 (Revised 0	2/2009)	Page 3
W	rite or Type Committee Name		
	STV Infrastructu	re PAC	
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
	Mailing Address	205 WEST WELSH DRIVE	
		DOUGLASSVILLE PA 19518	

7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee

STATE **▲**

Joint Fundraising Representative

ZIP CODE 🔺

Leadership PAC Sponsor

CITY **▲**

Connected Organization X Affiliated Organization

books and records.

Relationship:

Butcher, Th	nomas, , ,			
Mailing Address	225 Park Ave South			
	New York		NY 10003	
	CITY 🔺		STATE	ZIP CODE
Title or Position ▼				
		Telephone nun	nber 212 -	614 - 3335

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 of Treasurer	Butcher, Thomas, , ,
Mailing Address	225 Park Ave South
	New York NY 10003 Image: Ima
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Treasurer	614

FEC Form 1 (Revised 02	2/20)09)																			F	Page	e 4	۱		
Full Name of Designated Agent	1																										
Mailing Address																											
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Title or Position ▼																											
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9. 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.

	Santander Bank		
Mailing Address	450 Penn Street		
	Reading	 PA 19602	
	CITY	STATE A	ZIP CODE ▲
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY	STATE A	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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STATE **A**

ZIP CODE