Image# 201602119008455105	i		_	PAGE 1/4
FEC FORM 1	STATEMEI ORGANIZ		Office	e Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
	22 CLEVELAND ST			
ADDRESS (number and street	:)			
 (Check if address is changed) 				
	ALBANY		NY 12206 STATE ▲	
COMMITTEE'S E-MAIL ADD	RESS			
(Check if address is changed)				
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE (Check if address is changed)				
2. DATE 02	D D / Y Y Y Y 11 2016			
3. FEC IDENTIFICATION	NUMBER ► C C	00608448		
4. IS THIS STATEMENT	X NEW (N) OR	AMENDED (A)		
I certify that I have examine	d this Statement and to the best	of my knowledge and belief it	t is true, correct and co	omplete.
Type or Print Name of Treas	urer Nick Butler			
Signature of Treasurer	lick Butler	[Electronically Filed]	Date 02	11 / Y Y Y Y 2016
NOTE: Submission of false, er	roneous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ION SHOULD BE REPORTED V		enalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	ion 🔽	EC FORM 1 Revised 06/2012)

02/11/2016 12 : 54

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FEG	C Form 1 (Revised 02/2009)	Page 2
TYPE C	DF COMMITTEE	
Candi	date 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
Name o Candida		
Candida Party At	01100	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida		
Party	Committee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected organization is
	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 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.)	
Joint F	Fundraising 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.	wo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
(Committees Participating in Joint Fundraiser	
	1 FEC ID number C	
2	2 FEC ID number C	
:	3 FEC ID number C	
4	4.	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

DON'T APPROVE THIS SUPERPAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N			
	Mailing Address		
		CITY	STATE ZIP CODE
	Relationship: Connected	Organization Affiliated Committee Join	nt Fundraising Representative Leadership PAC Sponsor
7.	Custodian of Records: Iden books and records.	tify by name, address (phone number optior	nal) and position of the person in possession of committee
	Nick Butler		
	Full Name	,22 Cleveland St	
	Mailing Address		
		Albany	NY 12206

Unpaid Intern	Telephone number	

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	Nick Butler	1 1	I	I	1	1	I	 I	I	I	I	I		I	I	1	1	I	1	I	I	ī	I		I	.
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Full Name of Designated Agent																												
Mailing Address																												
CITY														STA	ΛΤΕ				ZIF	D C	OD	Е						
Title or Position																												
													Tele	eph	one	e ni	umt	ber										

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.

Trustco	Bank		
Mailing Address	1475 Western Ave		
	Albany		12203
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE