

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEC MAILCENTER

2025 JAN 10 PM 1:04

1. NAME OF
COMMITTEE (In full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Mr Gunther for Congress

ADDRESS (number and street)

No. 1 Railroad Pl

☐

(Check if address
is changed)

P.O. Box 97

Shushan

CITY

NY

STATE

12873

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

☐

(Check if address
is changed)

Mr Gunther for Congress@gmail.com

Optional Second E-Mail Address

wmosko7631@aol.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

Mr Gunther for Congress.com

2. DATE

12

24

2024

3. FEC IDENTIFICATION NUMBER

C To Be Assigned

4. 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.

Type or Print Name of Treasurer

William Moskowitz

Signature of Treasurer

William Moskowitz

Date

12

30

2024

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
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 03/2022)

5. TYPE OF COMMITTEE:

Candidate 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. (Complete the candidate information below.)

Name of
Candidate

J o h n G u n t h e r

Candidate
Party Affiliation

DEM

Office
Sought:☒ House☐ Senate☐ President

State

NY

District

2 1

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) ☐ This committee is a ☐ N A T (National, State or subordinate) committee of the ☐ D E M (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 ☐ 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 segregated fund or party committee. (i.e., nonconnected committee)

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

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

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

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

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

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

Joint Fundraising Representative:

- (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. _____

C

C

NON-PROFIT CORPORATION

Mr Gunther for Congress



Relationship: ☐ Connected Organization ☐ Affiliated Organization ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

Full Name | R o s e | O D o n n e l l |

P.O. Box 97
Shushan, N.Y. 12873-

Bookkeeper Telephone number 518-338-8311

Telephone number

5	1	8
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3	3	8
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8	3	1	1
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Full Name
of Treasurer

W i l l i a m M o s k o w i t z

6 5 0 | V a n | W a g n e r | R o a d |
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|
| P o u g h k e e p s i e | | N , Y | | 1 2 6 0 3 | - |

[illegible]

Telephone number | 4 | 2 | 3 | - | 3 | 2 | 9 | - | 1 | 6 | 5 | 0 |

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ZIP CODE ▲

_____-_____-_____

- Name of Bank, Depository, etc.

A horizontal number line with 20 tick marks, labeled from 0 to 19. The line is used for plotting data points.

A horizontal number line with tick marks every 10 units, labeled from 0 to 100. The number 10 is shaded in blue.

ZIP CODE ▲

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	5
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ZIP CODE ▲

5(i) or (j). Joint Fundraising Participant:

1. _____
2. _____
3. _____
4. _____

FEC ID number

C _____

FEC ID number

C _____

FEC ID number

C _____

FEC ID number

C _____

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

Mailing Address

_____ - _____

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲



Connected Organization



Affiliated Committee



Joint Fundraising Representative



Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Mailing Address

_____ - _____

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

_____-_____-_____

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.

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

EXPRESS

Envelope
Recycle me

FZ
RT 724
2 17:00
2190 01:07

2005 JAN 10 PM 1:04
RECEIVED
FEDERAL ELECTION COMMISSION

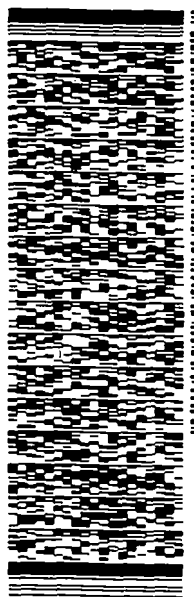
Part # 156297-435 RRDB2 EXP 09/25

ORIGIN 10:GFLA (518) 338-8311 ROSE O'DONNELL PO BOX 97 SHUSHAN, NY 12823 UNITED STATES US	SHIP DATE: 02JAN25 ACTWT: 0.10 LB CWD: 6570384/RDS42570
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FEDERAL ELECTION COMMISSION
1050 FIRST ST NE

WASHINGTON DC 20002

0000 000-0000
REF: DEPT: PO:



TRK# 77111 5956 2190
0201

SP JPNA

MON - 06 JAN 5:00P
** 2DAY **
20002
DC-US IAD



Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): FedEx	<div style="display: flex; justify-content: space-between;"> <div> Shipping Date 1-2-25 </div> <div> Date of Receipt 1-10-25 </div> </div> <div style="text-align: right;"> Next Business Day Delivery <input type="checkbox"/> </div>
<input type="checkbox"/> Received via FAX	Date of Receipt
<input type="checkbox"/> Received via Email	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
JAM PREPARER (4/2023)	1-10-25 DATE PREPARED

NON-PROFIT ORGANIZATION