**FEC** 

Only

# STATEMENT OF

PAGE 1 / 21

**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. NY Republican Federal Campaign Committee 315 State St ADDRESS (number and street) (Check if address is changed) Albany 12210-2001 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address mmclam@nygop.org is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.nygop.org (Check if address is changed) DATE 2025 C00055582 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. Type or Print Name of Treasurer Wells, Steven,, Wells, Steven, , , 06 2025 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

E	EC Form 1 (Revised 03/2022)	Page <b>2</b>
	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 information below.)	e candidate
	Name of Candidate	
	Candidate Party Affiliation Office Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) X This committee is a STA (National, State or subordinate) committee of the REP (Democratic Republican,	•
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	Corporation Corporation w/o Capital Stock Labor O	rganization
	Membership Organization Trade Association Coopera	tive
	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 committee. (i.e., nonconnected committee)	d 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.)	
	(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 PA	AC).
	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 o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Committees Participating in Joint Fundraiser	
	1 C	
	C	

! 	FEC Form 1 (Revised 0	2/2009)		Page <b>3</b>
V	Vrite or Type Committee Name			
_	•	ederal Campaign Comi		
6.	-	ganization, Affiliated Committee, Joint	t Fundraising Representative,	or Leadership PAC Sponsor
	Republican National	Committee		
	Mailing Address	310 1st St SE		
		Washington	DC L	20003-1885
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization	Joint Fundraising Represent	ative Leadership PAC Sponso
7.	Custodian of Records: Ident books and records.	fy by name, address (phone number op	tional) and position of the perso	n in possession of committee
	Mclam, Ma	rie, , ,		
	Full Name	245 200 200 21		
	Mailing Address	315 State Street		
		Albany	NY	12210-2001
		CITY ▲	CTATE A	ZIP CODE ▲
	Title or Position ▼	CITY A	STATE ▲	ZIP CODE A
	Custodian of Records		Telephone number	
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of ssistant treasurer).	the treasurer of the committee	; and the name and address of
	Full Name Wells, Stev	en, , ,		
	of Treasurer			
	Mailing Address	4478 Route		
		Suite 92		
		Cazenovia	NY NY	13035
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼	OIII =	SIAIE	ZII GODE =
	Treasurer		Telephone number	315

FEC Form 1	(Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent Mailing Address	Mclam, Marie, , ,	
	Albany NY STATE	12210-2001 ZIP CODE <b>A</b>
Title or Position		ZIF CODE A
Assistant Treasur	rer Telephone number	
	<b>Depositories:</b> List all banks or other depositories in which the committee deposit xes or maintains funds.	s funds, holds accounts, rents
Name of Bank, D	Depository, etc.	
Mailing Address	P.O. 1082	
	Schenectady	12301
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.	
	BB&T	
Mailing Address	2200 Wilson Blvd	
	Suite 100	
	Arlington	22201
	CITY ▲ STATE ▲	ZIP CODE ▲

#### : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

Form/Schedule: Transaction ID:

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

(h). <b>Joint Fundraisi</b>	ng Participant:				
1.			FEC ID	number	С
2.			FEC ID	number	С
3.			FEC ID	number	С
4.			FEC ID	number	C
Name of Any Connected	_	ed Committee, Joint F	undraising Rep	resentative	e, or Leadership PAC Spons
Mailing Address	PO Box 101				
-					
Relationship:	Bayport	CITY A		NY STATE ▲	11705-0101 ZIP CODE ▲
					_
Designated Agent: Identi			Joint Fundraising	Representa	ative Leadership PAC Spo
Designated Agent: Identi			_	Representa	ative Leadership PAC Spo
Designated Agent: Identi			_	Representa	ative Leadership PAC Spo
Designated Agent: Identi			_	Representa	Leadership PAC Spo
Designated Agent: Identi	y by name, address (p		al)	Representa	Leadership PAC Spo
Designated Agent: Identi  Full Name   Mailing Address	y by name, address (p	hone number — optiona	al)	STATE A	
Pesignated Agent: Identi  Full Name   _   _    Mailing Address  TITLE OR POSITION	by by name, address (p	hone number — optiona	Telephone No	STATE A	ZIP CODE A
Pesignated Agent: Identic Full Name	by by name, address (p	hone number — optiona	Telephone No	STATE A	

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

h). <b>Joint Fundraisin</b>	g i aiticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
Mailing Address	PO Box 500		
Relationship:	Glens Falls CITY	NY STATE A	12801-0500 - I
П	d Organization	Fundraising Representa	ative Leadership PAC Sp
Connected esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify		STATE A	ZIR CODE A
esignated Agent: Identify	CITY	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name    Mailing Address	CITY A	STATE A	ZIP COD
Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Deposito fety deposit boxes or ma	CITY   CITY   Te	elephone Number	
esignated Agent: Identify  Full Name	CITY   CITY   Te  ries: List all banks or other depositories in which intains funds.  One Bank  4825 Cordell Ave	the committee deposit	s funds, holds accounts, rents
esignated Agent: Identify  Full Name	CITY   CITY   Te  ries: List all banks or other depositories in which intains funds.  One Bank	elephone Number	

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

		FEC ID	number	
				C
		FEC ID	number	С
		FEC ID	number	С
		FEC ID	number	С
nected Organization	, Affiliated Committee, Joint	Fundraising Repr	esentative	, or Leadership PAC Spon
tory Committee				
P.O. Box 6	8			
South Sale	m 		NY	10590-
	CITY A		STATE A	ZIP CODE ▲
; <u> </u>				
;				
; <u> </u>				
SITION ▼	CITY A	S	TATE A	ZIP CODE A
t -	SS P.O. Box 6 South Sale	South Salem  CITY   Affiliated Committee	ory Committee  South Salem  CITY   CITY	South Salem  CITY   STATE   Connected Organization  Affiliated Committee  X Joint Fundraising Representation

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

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
-	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Protect The House 2	024 		
Mailing Address	PO Box 30844		
	Bethesda	MD	20824-0844
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Join by by name, address (phone number – optional)	nt Fundraising Representa	Leaueisiiip FAC S
		it ruidiaising nepiesenia	Leadership PAC Sp
esignated Agent: Identi		III ruidiaising nepieseille	Leadership FAC 3
esignated Agent: Identi		It runuraising nepresente	Leadership FAC 3
esignated Agent: Identi		It runuraising nepresente	Leadership FAC 3
esignated Agent: Identi  Full Name  Mailing Address	by by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi	by by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and ma	cories: List all banks or other depositories in which aintains funds.  Partial Bank  1044 William Floyd Pkway	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	cy by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

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

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	L Communication Affiliated Communities Laint Form	ducicio a Domino contestin	a an Landauskin DAO Consu
Schmitt Victory Fund	I Organization, Affiliated Committee, Joint Fun	uraising nepresentativ	e, or Leadership PAC Spon
Mailing Address	PO Box 67		
	South Salem	NY NY	10590-0067
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joint Indiana Affiliated Committee X Joint Ind	int Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   CITY   pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE   ZIP CODE   ts funds, holds accounts, rent
esignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A

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

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
_	d Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spon
Protect The House I	lew York 2024		
Mailing Address	PO Box 30844		
	Bethesda	MD	20824-0844
Relationship:	CITY A	STATE A	ZIP CODE ▲
	ed Organization Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
		oint Fundraising Represent	ative Leadership PAC Sp
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### Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
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lame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
Mailing Address	PO Box 500		
	Glen Falls	NY	12801-
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify	Affiliated Committee X Join  by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
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resignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma  ame of Bank, People	ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  tanks or Other Deposito afety deposit boxes or mailane of Bank, People	cies: List all banks or other depositories in which sintains funds.	STATE A Telephone Number	ZIP CODE A
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### Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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3.	<u> </u>		FEC ID	number	С
4.			FEC ID	number	С
Name of Any Conne	cted Organization, Af	filiated Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spon
Grow The Majori	ty NY				
Mailing Address	228 S Washing	gton St			
	Ste 115				
	Alexandria			VA	22314-5404
		CITV A		STATE ▲	ZIP CODE ▲
	nected Organization	CITY ▲  Affiliated Committee   ss (phone number – option	Joint Fundraising		Leadership PAC S
esignated Agent: Id		Affiliated Committee X			Leadership PAC S
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Conrection Control Con	dentify by name, addre	Affiliated Committee X	nal)		Leadership PAC S

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

	ng Participant:		
1.		FEC ID number	С
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4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Grow The Majority	<u> </u>		
Mailing Address	228 S Washington St		
	Ste 115		
Dalatianahin	Alexandria	VA VA	22314-5404
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X J  fy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
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esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
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esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whitaintains funds.  Fargo	STATE A Telephone Number	ZIP CODE A

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h). <b>Joint Fundraisi</b>	-		
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ame of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e. or Leadership PAC Spon
Stefanik - Esposito N			
Mailing Address	PO Box 500		
	Glens Falls	NY	12801-0500
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X J  fy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
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Page	of <sup>2</sup>	

h). <b>Joint Fundraisi</b>	3		
1.		FEC ID number	С
2.		FEC ID number	С
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ame of Any Connected	Organization, Affiliated Committee, Joint Fo	ındraising Renresentativ	re or Leadershin PAC Snon
Stefanik - Mazi NY V		Toprocontain	o, or Leadership FAC open
Mailing Address	228 S Washington St		
	Ste 115		
	Alexandria	VA I	22314-5404
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
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esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and the second and th	fy by name, address (phone number – optional opt	STATE  Telephone Number  inich the committee deposi	ZIP CODE A  ts funds, holds accounts, rent

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

(h). <b>Joint Fundraisi</b>	.g				
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4			FEC ID nu	mber (	
Name of Any Connected	Organization, Affiliated C	ommittee, Joint Fur	ndraising Repres	entative,	or Leadership PAC Spons
Mailing Address	228 S Washington St				
	Ste 115				
Relationship:	Alexandria	CITY A		VA ATE ▲	22314-5404 ZIP CODE <b>A</b>
	`		0.		2 0052 2
Designated Agent: Identi	Affiliated		oint Fundraising Re	presentativ	Leadership PAC Spo
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Designated Agent: Identi  Full Name    Mailing Address	by by name, address (phone		sint Fundraising Re		ZIP CODE ▲
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	by by name, address (phone)	number – optional)	STAT	TE A	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone  Ci  Cries: List all banks or othe	r depositories in whice	STAT	erdeposits f	ZIP CODE A
Pesignated Agent: Identification  Full Name	y by name, address (phone  Ci  Cries: List all banks or othe	r depositories in whice	STAT Telephone Numb	erdeposits f	ZIP CODE A

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	Any Connected of 47 Committee,		liated Committee, Joint	Fundraising Re	oresentative	e, or Leadership F	PAC Spons
Mai	iling Address	PO Box 509					
		Arlington			L VA ∣	22216-	]-
Rel	ationship:		CITY A		STATE A	ZIP C	ODE A
esignat		Organization by name, address	Affiliated Committee	Joint Fundraisin	g Representa	ative Leadersh	nip PAC Sp
esignat	ed Agent: Identify				g Representa	ative Leadersh	nip PAC Sp
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Page	of	۲ ۱	

h). <b>Joint Fundraisi</b>			
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2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Ny Victory Fund 202	<b>4</b> 		
Mailing Address	320 First Street SE		
	Washington	DC DC	20003-
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	С
2.		FEC ID number	С
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ame of Any Connected	Organization, Affiliated Committee, Joint Fo	undraising Representativ	e, or Leadership PAC Spons
Carey Lahood Fitzpa	trick Malliotakis (CLFM) Victory Fund		
Mailing Address	PO Box 26141		
	Alexandria	VA	22313-
Relationship:	CITY A	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee X  by by name, address (phone number – optional	Joint Fundraising Represent	ative Leadership PAC Sp
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h). <b>Joint Fundraisi</b>	ig i artioipanti		
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ame of Any Connector	Organization, Affiliated Committee, Joint Fu	ndraising Poprosontativ	o or Loadorchin BAC Spon
Elise Ny Victory	Organization, Anniated Committee, Some Po	indiaising nepresentativ	e, or Leadership PAC Spons
Mailing Address	PO Box 500		
	Glens Falls	NY NY	12801-
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	Affiliated Committee X	oint Fundraising Represent	ative Leadership PAC Sp
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