FEC

Only

STATEMENT OF

PAGE 1 / 18 •

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) New York State Democratic Committee 64 Beaver St. #210 ADDRESS (number and street) (Check if address is changed) New York 10004 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address leslien@nydems.org is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00143230 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 Alpert, David, , Date 12 19 2025 Signature of Treasurer Alpert, David, , , 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

FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate informati	ion below.)
(b) This committee is an authorized committee, and is NOT a principal campaign commiting information below.)	ittee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized con	nmittee.
Name of Candidate	
Party Committee:	
(d) This committee is a STA (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on lin	ne 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 secommittee. (i.e., nonconnected committee)	eparate segregated 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	5.)
(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 ac	ccounts (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 p committees/organizations, at least one of which is an authorized committee of a federal committee.	
(j) This committee collects contributions, pays fundraising expenses and disburses net p committees/organizations, none of which is an authorized committee of a federal can	-
Committees Participating in Joint Fundraiser	
1.	C

	FEC Form 1 (Revised 0	2/2000)	Page 3
	Vrite or Type Committee Name	2/2003)	raye 3
·	••	Democratic Committee	
6.		rganization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
	Democratic Grassroo		
	Mailing Address	430 South Capitol Street SE	
		Washington	20003
		CITY ▲ STATE	E ▲ ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Repre	esentative Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the p	person in possession of committee
	Ng, Leslie,	,, 	
	Mailing Address	64 Beaver St. #210	
		New York NY	10004
		CITY ▲ STATE	E ▲ ZIP CODE ▲
	Title or Position ▼		
	Accounts Manager	Telephone number	212 725 8825
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the commissistant treasurer).	nittee; and the name and address of
	Full Name Alpert, Dav	id, , ,	
	Mailing Address	64 Beaver St #210	
		1	
		New York NY	10004
		CITY ▲ STATI	E ▲ ZIP CODE ▲
	Title or Position ▼		
	Trocourer		. 212 725 9925

Telephone number

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position		ı	
	Telephone n	umber	
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the commes or maintains funds.	ittee deposits fu	nds, holds accounts, rents
Name of Bank, D	epository, etc.		
	Capital One Bank		
Mailing Address	299 Park Avenue		
	14th Floor		
	New York	NY	10171
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Signature Bank		
Mailing Address	71 Broadway		
	New York	NY	10006
	CITY ▲	STATE ▲	ZIP CODE ▲

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

Page ___ **of** ____

h). Joint Fundraisir	ig Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected Harris Victory Fund	Organization, Affiliated Committee, Joint Fundamental Fundamental Committee, Joint Fundamental Committe	draising Representative	e, or Leadership PAC Spon
Mailing Address	430 South Capitol Street SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint Join	nt Fundraising Represent	ative Leadership PAC Sp
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in whice aintains funds. amated Bank	STATE A Telephone Number	ZIP CODE A

Page	of ¹⁸	
rage	OI	

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
Torres Victory Fund	_		
Mailing Address	PO Box 15109		
	Washington	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identif	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Joint J	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee X Jointy by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the content of t	Affiliated Committee Joint Y Joint Y Joint Y STATE Y STATE Y STATE CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Jointy by name, address (phone number – optional) CITY CITY CITY Cries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A

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

Page ____ **of** ____

1.				
		FEC II	D number	C
3.		FEC II	D number	C
		FEC II	D number	C
4.		 FEC II	D number	C
Name of Any Connected O	rganization, Affiliated Committee, Joi	nt Fundraising Re	presentativo	e, or Leadership PAC Spons
Delgado Victory Fund 2	022		1 1 1 1	
Mailing Address	PO Box 65322			
maining / tadioco			1 1 1 1	
	Washington		DC	20035
Relationship:	CITY A		STATE A	ZIP CODE ▲
Connected 0	Organization Affiliated Committee	X Joint Fundraisin	_	ative Leadership PAC Sp
Full Name				
Mailing Address	<u> </u>			
	CITY A		STATE A	ZIP CODE A
TITLE OR POSITION	CITY A	Telephone N		ZIP CODE A

Dogo	of	18	
Page	of		

h). Joint Fundraisi	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e. or Leadership PAC Spon
-	/Democratic National Committee		
Mailing Address	430 South Capitol Street SE		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	t Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	t Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identi Full Name	ed Organization Affiliated Committee X Join	t Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identi Full Name	ed Organization Affiliated Committee X Join	t Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identi Full Name	Affiliated Committee X Join fy by name, address (phone number – optional)	st Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	Affiliated Committee	STATE A	ZIP CODE A
connected Esignated Agent: Identification of Position Identification Identi	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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

Page ___ **of** ____

h). Joint Fundraisi	ig Participant:			
1.		FEC ID	number	C
2.		FEC ID	number	C
3.		FEC ID	number	C
4.		FEC ID	number	С
		<u> </u>		
-	Organization, Affiliated Committee, Jo	int Fundraising Rep	resentative	, or Leadership PAC Spon
Patriot PAC Fund				
Mailing Address	PO Box 2113			
	Kingston		NY	12402
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Affiliated Committee Ty by name, address (phone number – or	X Joint Fundraising	Representa	tive Leadership PAC Sp
	_		Representa	tive Leadership PAC Sp
esignated Agent: Identi	_		Representa	tive Leadership PAC Sp
esignated Agent: Identi	_		Representa	Leadership PAC Sp
esignated Agent: Identi	_		Representa	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	by by name, address (phone number – op	otional)	Representa	Leadership PAC Sp
esignated Agent: Identi	by by name, address (phone number – op	otional)	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – op	otional) Telephone No	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ame of Bank, Bank or Bank	cy by name, address (phone number – operations) CITY CITY Pries: List all banks or other depositories aintains funds.	otional) Telephone No	STATE A	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 – operations) CITY CITY Pries: List all banks or other depositories aintains funds.	otional) Telephone No	STATE A	ZIP CODE A

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

Page ____ **of** ____

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID numb	per C
2.		FEC ID numb	per C
3.		FEC ID numb	per C
4.		FEC ID numb	per C
Name of Any Connected	I Organization, Affiliated Committee, Joint	Fundraising Represent	ative, or Leadership PAC Spons
Mailing Address	PO Box 15320		
Relationship:	Washington CITY ▲	DO STAT	
Designated Agent: Identi	Affiliated Committee Affiliated Committee fy by name, address (phone number – optio	Joint Fundraising Repre	sentative Leadership PAC Spo
			Sentative Leadership PAC Spo
Designated Agent: Identi			sentative Leadership PAC Spo
Designated Agent: Identi			Sentative Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optio		
Designated Agent: Identi	fy by name, address (phone number – optio	nal)	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optio	STATE Telephone Number	ZIP CODE A posits funds, holds accounts, rents
Pesignated Agent: Identification Full Name	fy by name, address (phone number – optio	STATE Telephone Number which the committee de	ZIP CODE A posits funds, holds accounts, rents

Page	of ¹⁸	
rade	OI	

1							
1				FEC II	O number	C	
2				FEC II	O number	С	
3.				FEC II	O number	С	
4.				FEC II	O number	С	
lame of	f Any Connected (Organization Affilia	ated Committee, Joint	Fundraising Re	nresentative	e or Leadershin PAC	Snons
	lle Victory Fund						
Ма	ailing Address	P.O. Box 90914					
		Rochester			NY	14609	
	lationship:		CITY A		STATE A	ZIP CODI	E 🛦
	Connected		Affiliated Committee X (phone number – option	Joint Fundraisin	g Representa	ative Leadership F	PAC Sp
esignat	Connected				g Representa	ative Leadership F	PAC Sp
esignat Full N	Connected ted Agent: Identify				g Representa	ative Leadership F	PAC Sp
esignat Full N	Connected ted Agent: Identify Name				g Representa	ative Leadership F	PAC Sp
esignat Full N	Connected ted Agent: Identify Name				g Representa	ative Leadership F	PAC Sp
esignat Full N Mailir	Connected ted Agent: Identify Name	by name, address			g Representa	Leadership F	

Page	of ¹⁸	
raue	OI .	

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
New York Majority F	und 	1 1 1 1 1 1 1	
Mailing Address	124 Washington St.		
	Suite 101		
	Foxboro	MA	02035
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
Connecte		int Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Paga	of ¹⁸	
Page	OT '	

(h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e. or Leadership PAC Spons
Empire State Victory			
Mailing Address	PO Box 65322		
	Washington	DC	20035
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			Ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional		
esignated Agent: Identi	fy by name, address (phone number – optional		Leadership PAC Sp
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional CITY A CITY A pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the property of the proposition of Bank, depository, etc.	fy by name, address (phone number – optional CITY CITY ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number ich the committee deposit	ZIP CODE A

Page	of ¹⁸	
rage	OI	

	FEC ID number	С
	FEC ID number	C
	FEC ID number	С
	FEC ID number	С
Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
		· · · · · · · · · · · · · · · · · · ·
600 Pennsylvania Ave SE		<u> </u>
Unit 15180		
Washington	DC	20003
CITY ▲	STATE ▲	ZIP CODE ▲
fy by name, address (phone number – optional)		
fy by name, address (phone number – optional)		
fy by name, address (phone number – optional)		
fy by name, address (phone number – optional)		
fy by name, address (phone number – optional)	STATE A	ZIP CODE A
	und 600 Pennsylvania Ave SE Unit 15180 Washington CITY ▲	FEC ID number d Organization, Affiliated Committee, Joint Fundraising Representative und 600 Pennsylvania Ave SE Unit 15180 Washington DC STATE STATE

Dogo	of 18	
Page	of 10	

h). Joint Fundraisir	ig Faiticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
		'	
-	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
Kennedy Victory Fun	a 		
Mailing Address	611 Pennsylvania Avenue SE		
	Ste. 143		
	Washington	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee X J		ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X J		ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee X J		ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee X J		Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee X J y by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee X J y by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing ame of Bank, epository, etc.	Affiliated Committee X J by by name, address (phone number – optional) CITY CITY cries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail arms of Bank,	Affiliated Committee X J by by name, address (phone number – optional) CITY CITY cries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing ame of Bank, epository, etc.	Affiliated Committee X J by by name, address (phone number – optional) CITY CITY cries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

Page	of ¹⁸	
rade	OI	

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
Laura Gillen Victory	Fund		
Mailing Address	PO Box 33079		
	Washington	DC	20033
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Join for by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identification Full Name	fy 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
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy 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
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 which aintains funds.	STATE A Telephone Number	ZIP CODE A
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 which aintains funds.	STATE A Telephone Number	ZIP CODE A

Dogo	of 18	
Page	of 10	

	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraisina Ranrasantativ	or Leadershin PAC Spons
Mannion Victory Fund	_		
Mailing Address	PO Box 11131		
	Syracuse	NY NY	13218
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Pesignated Agent: Identif	y by name, address (phone number – optional)		
Designated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in whice aintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or main and the second	ries: List all banks or other depositories in whice aintains funds.	Telephone Number	s funds, holds accounts, rents

Page	of ¹⁸	
rage	OI	

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connecte	d Organization, Affiliated Committee, Joint Fun	draising Penresentative	a or Leadershin BAC Snon
Dan Goldman New			
Mailing Address	PO Box 65322		
	Washington 	DC DC	20035
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	Affiliated Committee X Jo	int Fundraising Representa	
			Leadership PAC Sp
esignated Agent: Ident			
esignated Agent: Ident			
esignated Agent: Ident			
esignated Agent: Ident	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	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
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank,	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
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	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
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	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