Image# 201910159163880255			_	PAGE 1/4
FEC FORM 1	STATEMEI ORGANIZ			I
1. NAME OF	(Check if name	Example: If typing, type		e Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
Dan Roberti for	Congress			
ADDRESS (number and street)	7 Victoria Ln			
(Check if address				
is changed)	Westport		CT 06880	D
			STATE ▲	ZIP CODE
COMMITTEE'S E-MAIL ADD	RESS			
(Check if address is changed)	zamore@capcomplian			
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE A (Check if address is changed)	NDRESS (URL)			
2. DATE 10	15 / Y Y Y Y 2019			
3. FEC IDENTIFICATION	NUMBER ► C C	00494096		
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 c	complete.
	McClutchers De 11			
Type or Print Name of Treasu	Irer McClutchey, Daniel, , ,			
Signature of Treasurer	Clutchey, Daniel, , ,	[Electronically Filed]	Date 10 /	15 / Y Y Y Y 2019
NOTE: Submission of false, erro	oneous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing t ON SHOULD BE REPORTED W		enalties of 2 U.S.C. §437g.
Office Use Only		For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	on r	EC FORM 1 (Revised 06/2012)

10/15/2019 10 : 08

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	FE	EC Foi	rm 1 (Revised 02/2009)	Page 2
	TYPE	OF C	OMMITTEE	
	Cand	lidate	e 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. (Comp information below.)	lete the candidate
	Name Candic		Roberti, Daniel, Francis, ,	
	Candic Party /		on DEM Office Sought: K House Senate President	State CT District 05
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candic			
	Party	v Com	nmittee:	
	(d)			Democratic, lepublican, etc.) Party.
	Politi	cal A	ction Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 seg committee. (i.e., nonconnected committee)	regated 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	Fund	Iraising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
((h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
		Com	mittees Participating in Joint Fundraiser	
		1.	FEC ID number	
		2.	FEC ID number	
		3.	FEC ID number	
		4.	FEC ID number	

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FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

Dan Roberti for Congress

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

Mailing Address									
	CITY	STATE ZIF	P CODE						
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor									

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

Zamore, J	udith, , ,
Full Name	
Mailing Address	918 Pennsylvania Ave SE
	Washington DC 20003
Title or Position	CITY STATE ZIP CODE
Assistant Treasurer	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	McClutchey, Daniel, , ,
Mailing Address	7 Victoria Ln
	Westport
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																									
Mailing Address																									
		L																							
															L			L							
						CI	TΥ								ST	ATE	Ξ			ΖI	PC		ЭЕ		
Title or Position																									
										Tel	eph	ione	e n	um	ber		L							<u> </u>	

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.

Webst	er Bank		
Mailing Address	2 High St		
	Farmington		06032
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE