Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) FirstEnergy Corp Political Action Committee 76 South Main Street ADDRESS (number and street) (Check if address is changed) Akron 44308 OH CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address astansky@firstenergycorp.com is changed) Optional Second E-Mail Address fepac@firstenergycorp.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00140855 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 Helinski, Amanda M, , Ms. Helinski, Amanda M,, Ms., Date 01 16 2025 Signature of Treasurer 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

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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				
Candidate Office House Senate President	State District			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the Republican, e	etc.) Party			
Political Action Committee (PAC):				
(e) X 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 Org	ganization			
Membership Organization Trade Association Cooperati	ve			
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	C).			
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.				
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. C				

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V	Vrite or Type Committee Name	,		
	• .	Political Action Committee		
6.		ganization, Affiliated Committee, Joint Fundra	ising Representative, or Lead	lership PAC Sponsor
	FirstEnergy Corp.			
	Mailing Address	76 South Main Street		
		Akron	OH 4430	08
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: X Connected	Organization Affiliated Organization Joint	Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) an	nd position of the person in posse	ession of committee
	Helinski, Ar	nanda M., , Ms.,		
	Full Name			
	Mailing Address	76 South Main Street		
		Akron	OH 4430	08
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Tele	ephone number	
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasussistant treasurer).	surer of the committee; and the	name and address of
	Full Name Helinski, Ar	manda M, , Ms.,		
	Mailing Address	76 South Main Street		
		Akron	OH 4430	08
	Title or Desition —	CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼ Treasurer	Tele	ephone number 216	272 - 8623

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Full Name of Designated Agent Mailing Address	Helinski, Amanda M, , , 76 South Main Street Akron OH 4	4308		
Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲		
Treasurer	Telephone number]-[
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	The Huntington National Bank PO Box 1558 EA1W37			
Ü				
	Columbus OH 43	3216-1558		
	CITY ▲ STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.				
Mailing Address				
	CITY ▲ STATE ▲	ZIP CODE ▲		

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ H98 'HC' 5 'F9 DCFH Z G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

Updated Treasurer Name, custodian of records, and full name of designated agent along with contact Information. Updated date of Treasure signature/file date.

Form/Schedule: Transaction ID: