

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full) (Check if name
is changed) Example: If typing, type
over the lines.

12FÉ4M5

Larson Design Group PAC

ADDRESS (number and street) 1000 Commerce Park Drive

(Check if address
is changed)

Suite 201

Williamsport

CITY ▲

PA

17701

- 5475

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

tkelly@larsondesigngroup.com

Optional Second E-Mail Address

irromano@larsondesigngroup.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

.....

2. DATE MM / DD / YYYY 05 / 07 / 2025

3. FEC IDENTIFICATION NUMBER ►

C 00366229

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 Timothy J. Kelly

Signature of Treasurer

T = J Kelly

Date

MM / DD / YYYY 05 / 07 / 2025

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

Candidate Party Affiliation Office Sought: 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 (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.

C

2.

C

Write or Type Committee Name

Larson Design Group PAC**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**Mailing Address -

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization 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.Full Name Mailing Address -

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

 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 Mailing Address -

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

 Telephone number - -

Full Name of
Designated
Agent

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

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.

First National Bank of Pennsylvania

Mailing Address

90 Maynard Street

Williamsport

PA

17701

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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

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

FEC ID number
C
C
C
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 ▲

Political committees which have been established, financed, maintained or controlled by a subsidiary, branch or State, local, or other subordinate unit of an organization list:

- The name of the subsidiary, branch or State, local, or other subordinate unit and the name of the parent organization of which it is a part. Under "Relationship," enter "connected" AND
- The name of the highest level political committee sponsored by the parent organization. Under "Relationship," enter "affiliated."
- State party committees list any subordinate committees (i.e., any county, district or local committee) under the control or direction of the State committee. Under "Relationship," enter "affiliated." (See 11 CFR 110.3(b).)
- Subordinate State party committees list the State party committee. Under "Relationship," enter "affiliated." (See 11 CFR 110.3(b).)
- Joint fundraising participants list the committee established to act as the joint fundraising representative. Under "Relationship," enter "joint fundraising representative."

Leadership PACs (as defined in item 5(f) above) must identify their sponsoring candidate or officeholder, but should not list that candidate's campaign committee as an affiliated committee.

Separate segregated funds must provide the full name and address of their "connected organization." Note: The term "connected organization" means any organization which is not a political committee but which directly or indirectly establishes, administers or financially supports a political committee. A connected organization may be a corporation (including a corporation without capital stock), a labor organization, a membership organization, a cooperative or a trade association. The definition of "affiliated committee" is contained at 11 CFR 100.5(g).

LINE 7. Enter the name, address and committee position or the title of

custodian of the committee's books and records on Line 7. The telephone number is optional, but is helpful in expeditiously resolving potential filing problems. If the treasurer is the custodian of records, the term "treasurer" is sufficient for Line 7.

LINE 8. Enter the name and address of the committee's treasurer on Line 8. The name and address of any designated agent (e.g., assistant treasurer) must also be included on Line 8. Every political committee must have a treasurer and may designate an assistant treasurer who shall assume the duties and responsibilities of the treasurer, in the event the treasurer is unavailable. The Commission recommends that each political committee designate an assistant treasurer because no contribution or expenditure may be accepted or made by or on behalf of a political committee at a time when there is a vacancy in the office of the treasurer. No expenditure may be made for or on behalf of a political committee without the authorization of its treasurer or another agent authorized orally or in writing by the treasurer.

LINE 9. The committee must provide the name and mailing address of any bank, repository, or depository where the committee holds funds. Each political committee must have a checking account or transaction account at one of its depositories. All receipts of a political committee must be deposited into a designated campaign depository. All disbursements must be made by check or similar drafts drawn on an account at a designated campaign depository, except for expenditures of \$100 or less made from a petty cash fund.

Submit any additional information required for any Line on separate continuation sheets appropriately labeled and attached to the Statement of Organization. Indicate in the appropriate section when information is continued on separate page(s).

Treasurer's Responsibilities

The treasurer of the political committee must preserve a copy of the Statement of Organization and each amendment for a period of not less than 3 years after the date of filing. The treasurer of the political committee is personally responsible for the timely and complete filing of this Statement and for the accuracy of any information contained in it.

Where to File

The original Statement of Organization (FEC FORM 1) and all amendments must be filed with the appropriate office as follows:

- All political committees file with the Federal Election Commission, 1050 First Street, N.E., Washington, DC 20463. Reports shipped via FedEx, UPS or DHL should use the ZIP code 20002.
- An authorized committee which is not the principal campaign committee of a candidate files with the principal campaign committee which must forward a copy to the appropriate office listed herein.

Principal campaign committees of House and Senate candidates must file a copy of this form with the state in which the office is sought, with the exception of committees of candidates in states that have qualified for the Commission's state filing waiver program. Principal campaign committees of Presidential candidates must file a copy of this form in each state in which they have made expenditures, with the exception of those states that have qualified for the Commission's state filing waiver program. A list of qualified states is available from the Federal Election Commission.

Unauthorized political committees must continue to file copies of this form with the states in which they have their headquarters, with the exception of committees that are located in states that have qualified for the state waiver program.

The Treasurer must sign the Statement of Organization.

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Label 228, March 2016

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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<input type="checkbox"/> No Postmark		
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date	Date of Receipt
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<input type="checkbox"/> Received via FAX	Date of Receipt	
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<i>WJS</i>	<i>5/9/25</i>	
PREPARER	DATE PREPARED	

(4/2023)