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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) New York State Right to Life Committee Inc Political Action Committee 41 State Street ADDRESS (number and street) M-100 (Check if address is changed) Albany 12207 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS edwelch@libertytax.com (Check if address is changed) Optional Second E-Mail Address admin@nysrighttolife.org| COMMITTEE'S WEB PAGE ADDRESS (URL) nysrighttolife.org (Check if address is changed) DATE 2017 C00105080 FEC IDENTIFICATION NUMBER 3. 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. Welch, Edward, Joseph,, Type or Print Name of Treasurer Welch, Edward, Joseph,, [Electronically Filed] 05 15 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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

Only

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		OMMITTEE  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. (Con information below.)	nplete the candidate				
Name Candi							
Candi Party	idate Affiliatio	Office Sought: House Senate President	State District				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Candi							
Part	y Com	mittee:  (National, State	(Democratic				
(d)		This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party				
Polit	ical A	ction Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is				
		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 ommittee. (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.)					
Joint	Fund	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.					
	Comi	mittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4						

Title or Position Treasurer

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Write or Type Committee Name	9		
New York State	Right to Life Committe	ee Inc Political Act	ion Committee
6. Name of Any Connected (	Organization, Affiliated Committee, Joint F	Fundraising Representative, or Le	adership PAC Sponsor
New York State Right	to Life Committee Inc Political	Action Committee	
Mailing Address	41 State Street		
	M-100		
	Albany	NY 12	207 
	CITY	STATE	ZIP CODE
books and records.	ntify by name, address (phone number op	otional) and position of the person	in possession of committee
Full Name	,153 South Lake Ave		
Mailing Address	100 GOUIT Earle AVE		
	Albany	NY 12	208
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number 518	
3. <b>Treasurer:</b> List the name an any designated agent (e.g.,	d address (phone number optional) of the assistant treasurer).	e treasurer of the committee; and t	he name and address of
Full Name Welch, Ed	ward, Joseph, ,		
Mailing Address	153 South Lake Ave		
	Albany	NY   12	208

CITY

STATE

Telephone number

518

ZIP CODE

5857

207

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE Z	IP CODE
Title or Position		1.1
	Telephone number	
Name of Bank,  Mailing Address	Berkshire Bank  41 State Street  Albany  NY 12207	
	111 1220	
	CITY STATE Z	ZIP CODE
Name of Bank,	Depository, etc.	
Mailing Address		
Mailing Address		
Mailing Address		