

RECEIVED
FEC MAILCENTER

2026 JAN 23 AM 10:44

Depalis For Congress Committee

1490 Ocean Avenue #5C
Brooklyn, NY 11230
Email: jean@depalisforcongress.com
Alternate email: designtech4@yahoo.com

Tel: (718) 312- 2205

Federal Election Commission
1050 First Street, NE
Washington, DC 20002

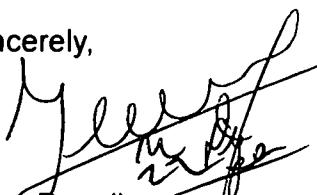
June 20, 2026

Dear Sir/Madam;

I am running for House Congressional District 9 in Brooklyn, NY. The enclosed application is to register my committee, and to obtain the FEC ID number which starts with the letter C. I would really appreciate it if the (C) number can be emailed to me at the above email address.

Thanks a million! Have a blessed day!

Sincerely,


Jean Depalis
Candidate for Congress

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.

12FE4M5

DEPALIS FOR CONGRESS COMMITTEE

ADDRESS (number and street)

(Check if address
is changed)

11490 OCEAN AVENUE #5C

BROOKLYN

CITY ▲

NY

STATE ▲

11230-13842

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

JEAN@DEPALISFORCONGRESS.COM

Optional Second E-Mail Address

DESIGNTECH41@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

WWW.DEPALISFORCONGRESS.COM

2. DATE

01 20 2026

3. FEC IDENTIFICATION NUMBER ►

C

STATE ▲

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

NATALJA GRAY

Signature of Treasurer

Gray -

Date

01 20 2026

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

JENN FRITZNER DEPALIS

Candidate Party Affiliation

REP

Office Sought:

 House Senate President

State

**NY
09**

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 **REP** (National, State or subordinate) committee of the **REP** (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: **N/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. N/A

2.

C	C
C	C

Write or Type Committee Name

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

N/A

Mailing Address

N/A

N/A

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

REBECCA LAMARRE

Mailing Address

135 OCEAN AVENUE #56

BROOKLYN

NY 11215-1475

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

CUSTODIAN

Telephone number 347-995-0281

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

NATALIA GRAY

Mailing Address

1490 OCEAN AVENUE #56

BROOKLYN

NY 11230-3842

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

TREASURER

Telephone number 718-734-7706

STATE ▲

ZIP

Full Name of
Designated
Agent

MARIE EDITH LEMY

Mailing Address

59 NEW DROP LANE

HOPEWELL JUNCTION

NY

12533-9998

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

AGENT

Telephone number

718-928-4196

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.

BANK OF AMERICA

Mailing Address

1123 AVENUE J

BROOKLYN

NY

11230-4009

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

N/A

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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

FEC ID number	C					
FEC ID number	C					
FEC ID number	C					
FEC ID number	C					

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

N/A

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 MARY EDITH LEMY

Mailing Address 159 DEW DRUA LANE

HOPEWELL JUNCTION NY 12533-9998

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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. BANK OF AMERICA

Mailing Address 1123 AVENUE S

BRONXVILLE, N.Y. 11123(1)-4,009

CITY ▲ STATE ▲ ZIP CODE ▲

ORIGIN ID: MTPA (718) 312-2205
SHIP DATE: 21 JAN 26
JEAN DEPALIS
1490 OCEAN AVE SC
BROOKLYN, NY 11230
UNITED STATES US

ACTING: 01088
CAD: 65/0552/R05A2710

1050 1ST ST NE
TO **FEDERAL ELECTION COMMISSION**

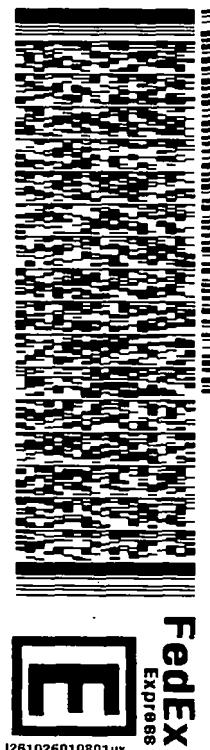
1050 1ST ST NE

WASHINGTON DC 20002

(202) 694-1044
REF: _____

IN:

DEPT:



FRI - 23 JAN 5:00P
0201 8880 7505 4969
** 2DAY **

Envelope K6 JPNA

20002
DC-US
IAD



2026 JAN 23 AM 11:55
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REGISTRATION

Part # 156297-439 R/WMS/AS/MS/01/27

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date FED EX 01/21/26 Date of Receipt 01/23/26 Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received via FAX	Date of Receipt
<input type="checkbox"/> Received via Email	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (4/2023)	01/23/26 DATE PREPARED