

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

First Niagara Bank, N.A. PAC

ADDRESS (number and street) Larkin Building - 726 Exchange Street

[] (Check if address is changed) Suite 618

Buffalo NY 14210

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) [] (Check if address is changed) Joanne.bramer@fnfg.com

COMMITTEE'S WEB PAGE ADDRESS (URL) [] (Check if address is changed)

2. DATE 09 24 2014

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT [X] 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 Joanne Bramer

Signature of Treasurer [Signature]

Date 11 05 2014

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 Use Only				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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UNIVERSITY MICROFILMS

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.)

Joint Fundraising Representative:

- (g) 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.
- (h) 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. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

20100111 11:00:00

Write or Type Committee Name

First Niagara Bank, N.A. PAC

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

First Niagara Bank, N.A.

Mailing Address

Larkin Building - 726 Exchange Street

Suite 618

Buffalo

NY

14210

CITY

STATE

ZIP 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.

Full Name

Joanne Bramer

Mailing Address

Larkin Building - 726 Exchange Street

Suite 618

Buffalo

NY

14210

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 716 - 858 - 3443

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

Joanne Bramer

Mailing Address

Larkin Building - 726 Exchange Street

Suite 618

Buffalo

NY

14210

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number 716 - 858 - 3443

Full Name of Designated Agent

Michelle Fisher

Mailing Address

730 Borden Road

Cheektowaga NY 14227 -

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number 716 - 225 - 4100

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 Niagara Bank

Mailing Address

726 Exchange Street

Suite 900

Buffalo NY 14210 -

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

COMMUNICATIONS - 1-800-211-8585

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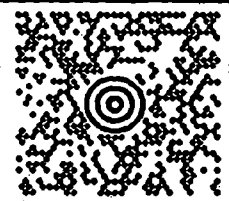
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WASHINGTON DC 20463-0001

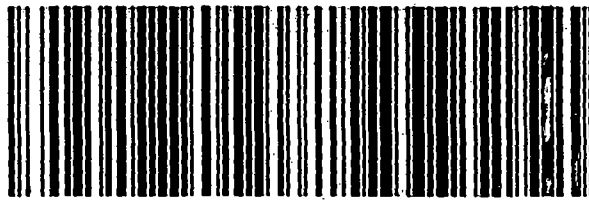


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Federal Election Commission
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 PREPARER	<i>11/6/14</i> DATE PREPARED
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