Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. BELLOWS FOR SENATE 33 KERNS HILL RD ADDRESS (number and street) (Check if address is changed) MANCHESTER 04351 ME CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS susan@lebinyates.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00550434 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. Bastey, John, Lawrence, , III Type or Print Name of Treasurer Bastey, John, Lawrence, , III [Electronically Filed] 10 15 2019 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

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TYPE OF COMMITTEE	
Candidate Committee:  (a) This committee is a principal campaign committee. (Complete the candidate Complete the candidate Complete the candidate Committee)	date information below \
(a) This committee is a principal campaign committee. (complete the canal	,
(b) This committee is an authorized committee, and is NOT a principal cam information below.)	paign committee. (Complete the candidate
Name of Candidate Bellows, Shenna, , ,	
Candidate Party Affiliation  DEM  Office Sought: House  Senate	State President Oct
	District 00
(c) This committee supports/opposes only one candidate, and is NOT an au	uthorized committee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, e Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organic	ization on line 6.) Its connected organization is a
Corporation Corporation w/o Capi	tal 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 committee. (i.e., nonconnected committee)	d is NOT a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor of	on line 6.)
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disbucommittees/organizations, at least one of which is an authorized committee	
(h) This committee collects contributions, pays fundraising expenses and disbu committees/organizations, none of which is an authorized committee of a fe	
Committees Participating in Joint Fundraiser	
1.               FEC	ID number C
2.             FEC	ID number C
3.             FEC	ID number C
	ID number C

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Write or Type Committee Nar		i age 🗸
BELLOWS FO		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
NONE		
Mailing Address		
	CITY STATE Z	ZIP CODE
Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
<ol> <li>Custodian of Records: Id books and records.</li> </ol>	entify by name, address (phone number optional) and position of the person in poss	session of committee
	Shenna, , ,	
Full Name	33 Kerns Hill Rd.	
	Manchester ME 04351	
Title or Position	CITY STATE Z	ZIP CODE
Assistant Treasurer	Telephone number	
8. <b>Treasurer:</b> List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nam assistant treasurer).	ne and address of
Full Name Bastey, of Treasurer	lohn, Lawrence, , III	
Mailing Address	61 Middle St.	
	Apt 3	
	Hallowell  CITY  STATE  Z	
Title or Position Treasurer		ZIP CODE 4036

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Full Name of Designated	Bellows, Shenna, , ,	
Agent	33 Kerns Hill Rd.	
Mailing Address	OS REITS FILL RU.	
	Manchester ME 0435	<u> </u>
	CITY STATE	ZIP CODE
Title or Position Assistant Treas	urer Telephone number	
Banks or Other safety deposit be	<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.	olds accounts, rents
Name of Bank,		
	Bangor Savings Bank	, , , , , , , , ,
Mailing Address	180 Middle St.	
	Portland ME 0410	
	CITY STATE	ZIP CODE
Name of Bank,		
Name of Bank,		
Name of Bank,  Mailing Address	Depository, etc.	
	Depository, etc.	
	Depository, etc.	