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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. Al Santos For Congress 360 Wilshire Blvd ADDRESS (number and street) STE 105 (Check if address is changed) Casselberry 32707 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS SantosForCongress@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.alsantos.org (Check if address is changed) DATE 2022 C00810721 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. Parra, Natalia, , , Type or Print Name of Treasurer Parra, Natalia, , , [Electronically Filed] 07 2022 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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	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 car information below.)	ndidate			
	Name of Candidate Santos, AI, , ,				
	Party Affiliation REP Sought: House Senate President	State FL			
	(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 (Democratic, or subordinate) committee of the Republican, etc.)) Party			
Political Action Committee (PAC):					
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	ganization is a:			
	Corporation Corporation w/o Capital Stock Labor Organi	zation			
	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 fun committee. (i.e., nonconnected committee)	d or party			
	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.				
	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				

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٧	Vrite or Type Committee Name	·			
	Al Santos For (Congress			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	NONE				
	1				
	Mailing Address				
		CITY ▲ ST.	TATE ▲ ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Re	epresentative Leadership PAC Sponso		
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Parra, Nata	lia, , ,			
	Full Name	 			
	Mailing Address	360 Wilshire Blvd			
	•	STE 105			
		Casselberry	FL 32707		
	Title or Position ▼	CITY ▲ ST.	TATE ▲ ZIP CODE ▲		
	Treasurer		407 810 3185		
	11940410	Telephone number	r [181		
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 Parra, Nata of Treasurer	ia, , ,			
	Mailing Address	360 Wilshire Blvd			
	Mailing Address	STE 105			
		Casselberry	FL 32707 1		
	Title or Position —	CITY ▲ ST	TATE ▲ ZIP CODE ▲		
	Title or Position ▼	I	407 _ 810 _ 3185		
	Treasurer	Telephone number	r		

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Full Name of Designated Agent					
Mailing Address					
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲		
	Telephone no	umber			
Banks or Other Depositori safety deposit boxes or main	es: List all banks or other depositories in which the commintains funds.	ttee deposits funds, hol	lds accounts, rents		
Name of Bank, Depository,	Name of Bank, Depository, etc.				
Truist Bank					
Mailing Address	3825 S Dale Mabry HWY				
	Tampa	FL 33611	-1405		
	CITY A	STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.					
Mailing Address					
	CITY A	STATE ▲	ZIP CODE ▲		