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Only

STATEMENT OF

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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. STEVE WELLS FOR CONGRESS 4478 SYRACUSE RD ADDRESS (number and street) (Check if address is changed) **CAZENOVIA** 13035 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS JANNA@CROSBYOTT.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) WWW.STEVEWELLSFORCONGRESS.COM (Check if address is changed) DATE 2022 C00815647 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. RUTLAND, JANNA, , , Type or Print Name of Treasurer RUTLAND, JANNA, , , [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

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 candidate information below.)					
	Name of Candidate WELLS, STEVEN, M, ,					
	Candidate Party Affiliation REP Office Sought: House Senate President	State NY District 22				
	(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 Republican, e	etc.) Party				
	Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization						
	Corporation Corporation w/o Capital Stock Labor Org	anization				
	Membership Organization Trade Association Cooperation	ve .				
	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.					
	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					

_	FEC Form 1 (Revised	d 02/2009)		Page 3
V	Vrite or Type Committee Nan			
_		LS FOR CONGRESS		
6.	Name of Any Connected NONE	Organization, Affiliated Committee, Joint Fundraising Repre	sentative, or Leader	ship PAC Sponsor
	Mailing Address			
		CITY A	STATE A	ZIP CODE ▲
	Relationship: Connecte	ed Organization Affiliated Organization Joint Fundraising	Representative	Leadership PAC Sponso
7.	Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of	the person in posses	sion of committee
	RUTLAN	ID, JANNA, , ,		
	Full Name			
	Mailing Address	4478 SYRACUSE RD		
		CAZENOVIA	NY 13035	
		CITY A	STATE A	ZIP CODE ▲
	Title or Position ▼			
	TREASURER	Telephone numb	ber	
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 RUTLAN	ID, JANNA, , ,		
	of Treasurer			
	Mailing Address	4478 SYRACUSE RD		
		CAZENOVIA	NY 13035	
		CITY A	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	TREASURER	Telephone numb	ber	

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Full Name of	11011000 02/2000)		l ago I		
Designated Agent					
Mailing Address					
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲		
	Tel	ephone number	-		
	epositories: List all banks or other depositories in which tes or maintains funds.	he committee deposits funds	, holds accounts, rents		
Name of Bank, De	pository, etc.				
Ĺ	CHAIN BRIDGE BANK				
Mailing Address	1445-A LAUGHLIN AVENUE				
	MCLEAN	VA 2	2101		
	CITY ▲	STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.					
L					
Mailing Address					
	CITY ▲	STATE ▲	ZIP CODE ▲		