Image# 202112289474741345				PAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ	_		
				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
	ress			
	17 Chestnut Ave			
ADDRESS (number and street)				
(Check if address is changed)				
	Pompton Lakes		NJ 07 STATE ▲	7442
COMMITTEE'S E-MAIL ADDR				
 (Check if address is changed) 	patrickjamesquinn.iii@	-		
Ç ,	Optional Second E-Mail Ad	dress		
(Check if address is changed)	www.quinnforcongress.us			
	14 / Y Y Y Y 12021			
3. FEC IDENTIFICATION N		:00780346		
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 ar	id complete.
Type or Print Name of Treasu	rer Quinn, Patrick, James, Mr.,			
Signature of Treasurer	nn, Patrick, James, Mr., III	[Electronically Filed]	Date 12	/ D D / Y Y Y Y 28 2021
NOTE: Submission of false, erro		may subject the person signing t ION SHOULD BE REPORTED W		e penalties of 2 U.S.C. §437
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	ontact:	FEC FORM 1 (Revised 06/2012)

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	FEC Fo	rm 1 (Revised 02/2009)	Page 2	
TYP	PE OF C	OMMITTEE		
Cai	ndidate	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. (Comp information below.)	lete the candidate	е
	ne of Ididate	Quinn, Patrick, James, Mr., III		
	ididate ty Affiliati	on REP Office Sought: K House Senate President	State District	NJ 09
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	ne of Ididate			
Par	rty Con	nmittee:		
(d)			Democratic, Republican, etc.) F	Party.
Pol	itical A	ction Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	nected organizatio	n is a:
		Corporation Corporation w/o Capital Stock	Labor Organizati	ion
		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 seg committee. (i.e., nonconnected committee)	gregated fund or	party
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Joir	nt Fund	raising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political	
	Com	mittees Participating in Joint Fundraiser		
	1.	FEC ID number		
	2.	FEC ID number		
	3.	EC ID number		
	4.	FEC ID number		

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Quinn For Congress

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

Mailing Address												
	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.

Quinn, Pat	trick, James, Mr., III
Full Name	
Mailing Address	17 Chestnut Avenue
	Pompton Lakes NJ 07442 Image: Image of the state of the
Title or Position	CITY STATE ZIP CODE
Candidate	Telephone number 201 280 0932

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	Quinn, Patrick, James, Mr., III
Mailing Address	17 Chestnut Avenue
	Pompton Lakes NJ 07442
	CITY STATE ZIP CODE
Title or Position	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																			1								
Mailing Address			l																								
			l																								
			l																							1	
CITY										STATE ZIP CODE																	
Title or Position																											
													Tele	eph	one	e ni	umt	ber									

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.

Valley	Bank			
Mailing Address	516 Wanaque Avenue			
	Pompton Lakes		NJ 07442	2
	С	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.			
Mailing Address				
	C	CITY	STATE	ZIP CODE