

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF  
COMMITTEE (in full)☐(Check if name  
is changed)Example: If typing, type  
over the lines.

12FE4M5

Lilac Party

ADDRESS (number and street)

73 Marion Street

☐(Check if address  
is changed)

1

Somerville

CITY ▲

MA

STATE ▲

02143

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐(Check if address  
is changed)

Weyand.Nic@gmail.com

Optional Second E-Mail Address

NicWeyand@ProtonMail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address  
is changed)

lilacparty.us

2. DATE

MM / DD / YYYY  
03 / 11 / 2025

3. FEC IDENTIFICATION NUMBER ►

C

C00899518

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 and complete.

Type or Print Name of Treasurer Schweitzer, Nicholas, Paul, ,

Signature of Treasurer Schweitzer, Nicholas, Paul, ,

Date

MM / DD / YYYY  
03 / 11 / 2025

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  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

## 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  
CandidateCandidate  
Party AffiliationOffice  
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.)

- (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.
- (j) ☐ 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.

2.

C

C

Write or Type Committee Name

Lilac Party

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

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☐ Connected Organization ☐ Affiliated Organization ☐ 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 Schweitzer, Nicholas, Paul, ,

Mailing Address 73 Marion Street

1

Somerville

MA

02143

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Founder

Telephone number 617 - 767 - 3006

## 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 Schweitzer, Nicholas, Paul, ,

Mailing Address 73 Marion Street

1

Somerville

MA

02143

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Founder

Telephone number 617 - 767 - 3006

Full Name of  
Designated  
Agent

Schweitzer, Nicholas, Paul, ,

Mailing Address

73 Marion Street

1

Somerville

MA

02143

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Founder

Telephone number

617

767

3006

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.

Harvard Federal Credit Union

Mailing Address

104 Mount Auburn Street

Cambridge

MA

02143

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: F1N  
Transaction ID :

I am currently in the process of changing my birth name (Nicholas Paul Schweitzer) to the name of my adopted family (Nic Weyand). I just called 18004249530, and they confirmed I will need to use my birth name, but I will be filing an amendment once my CJP 27 goes through in Massachusetts. Until then, I have not gone by Nic Schweitzer in years, and have used my Weyand.Nic@gmail.com email for nearly a decade now. I hope this clears up any confusion, and thank you very much! -Nic Weyand

Form/Schedule:  
Transaction ID: