Only

STATEMENT OF

PAGE 1 / 4

FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) John DeBellis for U.S. Senate Committee 284 Ewings Mill Road ADDRESS (number and street) (Check if address is changed) Moon Township 15108 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS .jdbella1976@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00767103 FEC IDENTIFICATION NUMBER > 3. 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. DeBellis, John, , , Type or Print Name of Treasurer DeBellis, John, , , [Electronically Filed] 01 2021 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

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information b	elow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. information below.)	(Complete the candidate
Name of Candidate DeBellis, John, , ,	
Candidate Office	State
Party Affiliation Rep Sought: House X Senate Preside	ent 00 District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	ee.
Name of Candidate	
Party Committee:	(D
((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.) I	ts 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 separation committee. (i.e., nonconnected committee)	ate segregated 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.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, none of which is an authorized committee of a federal candidate.	for two or more political
Committees Participating in Joint Fundraiser	
1.	
2.	
3.	
4.	

FEC Form 1 (Revised 0)2/2009)	Page 3
Write or Type Committee Name		
John DeBellis fo	or U.S. Senate Committee	
6. Name of Any Connected O	Organization, Affiliated Committee, Joint Fundraising Representative, or Leac	dership PAC Sponsor
NONE		<u> </u>
Mailing Address		710 0005
Relationship: Connected	CITY STATE d Organization Affiliated Committee Joint Fundraising Representative	ZIP CODE Leadership PAC Sponsor
. Custodian of Records: Iden books and records.	ntify by name, address (phone number optional) and position of the person in	possession of committee
Full Name Mailing Address	Ohn, , , , , , , , , , , , , , , , , , ,)8
Title or Position	CITY STATE	ZIP CODE
Candidate	Telephone number 412 –	327 - 3298
B. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name DeBellis, Jo of Treasurer Mailing Address		
Title or Position	Moon Township PA 1510 CITY STATE	ZIP CODE
Candidate	Telephone number 412 –	327 - 3298

FEC Forr	n 1 (Revised 02/2009)	Page 4
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Full Name of Designated Agent	DeBellis, John, , ,	1 1 1 1 1 1 1
Mailing Address	284 Ewings Mill Road	
	Moon Township PA 1510	
Title or Position	CITY STATE	ZIP CODE
Candidate		327 - 3298
safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.	ionas associme, rome
safety deposit be Name of Bank, I	Depository, etc. Huntington Bank	1 1 1 1 1 1 1 1
safety deposit bo	Depository, etc. Huntington Bank	
safety deposit be Name of Bank, I	Depository, etc. Huntington Bank	
safety deposit be Name of Bank, I	Depository, etc. Huntington Bank	
safety deposit be Name of Bank, I	Depository, etc. Huntington Bank 1007 Beaver Grade Road	
safety deposit be Name of Bank, I	Depository, etc. Huntington Bank 1007 Beaver Grade Road Moon Township PA 1510 CITY STATE	08
safety deposit be Name of Bank, I	Depository, etc. Huntington Bank 1007 Beaver Grade Road Moon Township PA 1510 CITY STATE	D8
safety deposit be Name of Bank, I	Depository, etc. Huntington Bank 1007 Beaver Grade Road Moon Township CITY STATE Depository, etc.	D8
Safety deposit be Name of Bank, I Mailing Address	Depository, etc. Huntington Bank 1007 Beaver Grade Road Moon Township CITY STATE Depository, etc.	D8
Safety deposit be Name of Bank, I Mailing Address	Depository, etc. Huntington Bank 1007 Beaver Grade Road Moon Township CITY STATE Depository, etc.	D8