FEC

Only

STATEMENT OF

PAGE 1 / 4

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Andrew Black for Congess 110 Metro Trail ADDRESS (number and street) (Check if address is changed) Hopatcong 07843 NJ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address Andrew.black.for.congress@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) andrewblackforhouseofrep.org (Check if address is changed) DATE 2024 C00878769 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. Type or Print Name of Treasurer Black, Andrew, , Date 05 13 2024 Signature of Treasurer Black, Andrew, , , 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

Έ	EC Form 1 (Revised 03/2022)	Page 2				
	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 information below.)	candidate				
	Name of Candidate Black, Andrew, , ,					
	Candidate Party Affiliation GRE Sought: X House Senate President	State NJ District 07				
	(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, e	tc.) 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 Organical Stock	anization				
	Membership Organization Trade Association Cooperative	'e				
	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 to committee. (i.e., nonconnected committee)	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.)					
	(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 r committees/organizations, at least one of which is an authorized committee of a federal candidate.	nore political				
(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						
	1C					

I	FEC Form 1 (Revised (02/2009)	Page 3		
۷	Vrite or Type Committee Name				
	Andrew Black fo				
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 Sponso		
	_				
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Black, And	rew, , ,			
	Full Name				
	Mailing Address	110 Metro Trail			
		Hopatcong	NJ 07843 -		
		CITY ▲	STATE ▲ ZIP CODE ▲		
	Title or Position ▼				
	Candidate	Telephone num	nber 862 - 296 - 3994		
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 Black, And of Treasurer	irew, , ,			
		110 Metro Trail			
	Mailing Address				
		Hopatcong	NJ 07843 - - -		
		CITY ▲	STATE ▲ ZIP CODE ▲		
	Title or Position ▼				
	Candidate	Telephone num	nber 862 - 296 - 3994		

Full Name of Designated Agent Mailing Address					
Mailing Address					
CITY ▲ STATE ▲ ZIP CODE A	L				
Title or Position ▼					
. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, resafety deposit boxes or maintains funds.	ents				
Name of Bank, Depository, etc.					
Chase Bank					
Mailing Address 80 US-206					
Stanhope					
CITY ▲ STATE ▲ ZIP CODE ▲					
Name of Bank, Depository, etc.					
Mailing Address					
CITY ▲ STATE ▲ ZIP CODE ▲	\				