**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. DeSantis for US Congress 970 Haddon Avenue ADDRESS (number and street) PO Box 8845 (Check if address is changed) Collingswood 08108 NJ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS desantis.mb@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) DeSantisForCongress.com (Check if address is changed) DATE 2021 C00789388 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. DeSantis, Mario, , , Type or Print Name of Treasurer DeSantis, Mario, , , [Electronically Filed] 10 06 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

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TYPE OF COMMITTEE Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information bel	low.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Committee of Condidate)  Name of Condidate  DeSantis, Mario, , ,	Complete the candidate
Candidate	
Candidate Party Affiliation  DEM  Office Sought:  House  Senate  Presiden	State NJ  District 01
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	<b>&gt;</b> .
Name of Candidate	
Party Committee:  (National, State	(Democratic,
(d) This committee is a or subordinate) committee of the	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 committee. (i.e., nonconnected committee)	e 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 for 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 for committees/organizations, none of which is an authorized committee of a federal candidate.	or two or more political
Committees Participating in Joint Fundraiser	
1. FEC ID number	
2. FEC ID number	
3.	
4.	

FEC <b>Form 1</b> (Revi	ised 02/2009)	Page <b>3</b>
Write or Type Committee		
DeSantis for	US Congress	
	ted Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
	Affiliated Committee Joint Fundraising Representative  Identify by name, address (phone number optional) and position of the person	Leadership PAC Sponsor in possession of committee
books and records.	. Taonary by Tamo, data oco (prono nambo). Opaonary and position or the position	possession of committee
DeSa Full Name	antis, Mario, , ,	
Mailing Address	970 Haddon Avenue	
	PO Box 8845	
	Collingswood	3108
Title or Position	CITY STATE	ZIP CODE
Candidate	Telephone number	238 2514
Treasurer: List the nam any designated agent (6	ne and address (phone number optional) of the treasurer of the committee; and e.g., assistant treasurer).	the name and address of
Full Name DeSa of Treasurer	antis, Mario, , ,	
Mailing Address	970 Haddon Avenue	
	PO Box 8845	
		3108
Title or Position	CITY STATE	ZIP CODE
		238 2514

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Full Name of Designated	I	
Agent		
Mailing Address	S	
Til 5 ''	CITY STATE	ZIP CODE
Title or Position		-   -
	Telephone number	
safety deposit b	er Depositories: List all banks or other depositories in which the committee deposits funds, boxes or maintains funds.  Depository, etc.	holds accounts, rents
safety deposit b	boxes or maintains funds.  Depository, etc.  TD Bank  1470 Clements Bridge Road	
safety deposit to Name of Bank,	boxes or maintains funds.  Depository, etc.  TD Bank  1470 Clements Bridge Road	
safety deposit by Name of Bank,  Mailing Address	boxes or maintains funds.  Depository, etc.  TD Bank  1470 Clements Bridge Road  Woodbury  NJ 080	996
safety deposit by Name of Bank,  Mailing Address	boxes or maintains funds.  Depository, etc.  TD Bank  1470 Clements Bridge Road  Woodbury  NJ 080  CITY  STATE	096 
safety deposit by Name of Bank,  Mailing Address	boxes or maintains funds.  Depository, etc.  TD Bank  1470 Clements Bridge Road  Woodbury  NJ 080  CITY  STATE	096 
safety deposit by Name of Bank,  Mailing Address  Name of Bank,	boxes or maintains funds.  Depository, etc.  TD Bank  1470 Clements Bridge Road  Woodbury  NJ 080  CITY  STATE	096 
safety deposit by Name of Bank,  Mailing Address  Name of Bank,	boxes or maintains funds.  Depository, etc.  TD Bank  1470 Clements Bridge Road  Woodbury  NJ 080  CITY  STATE	096 