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. Brandon For Congress NY22 PO Box 3580 ADDRESS (number and street) (Check if address is changed) Syracuse 13220 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address compliance@clcompliance.com is changed) Optional Second E-Mail Address info@brandonforcongressny22.com COMMITTEE'S WEB PAGE ADDRESS (URL) brandonforcongressny22.com (Check if address is changed) DATE 2024 C00806307 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT NEW (N) 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 Wojciechowski, Maria,, Wojciechowski, Maria, , , Date 01 13 2024 Signature of Treasurer 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

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate in	formation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign information below.)	committee. (Complete the candidate
Name of Candidate Williams, Brandon, McDonald, ,	<u></u>
Candidate Party Affiliation REP Office Sought: House Senate	State NY President
(c) This committee supports/opposes only one candidate, and is NOT an authorize	District 22 ed committee.
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 Corporation Corporation w/o Capital Stock Membership Organization Trade Association In addition, this committee is a Lobbyist/Registrant PAC. (f) This committee supports/opposes more than one Federal candidate, and is NO committee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC.	Labor Organization Cooperative
In addition, this committee is a Leadership PAC. (Identify sponsor on	line 6.)
(g) This committee is an independent expenditure-only political committee (Super I	PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution. In addition, this committee is a Lobbyist/Registrant PAC.	tion accounts (Hybrid PAC).
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, at least one of which is an authorized committee of	•
(j) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, none of which is an authorized committee of a feder	•
Committees Participating in Joint Fundraiser	
1.	C

•	FEC Form 1 (Revised 0	2/2009)		Page 3
٧	Write or Type Committee Name			
	Brandon For Co	ngress NY22		
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Re	epresentative, or Leade	ership PAC Sponsor
	Team Brandon Victor	ry Committee		
	Mailing Address	PO Box 3580		
		Syracuse	NY 13220)
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundrai	ising Representative	Leadership PAC Sponso
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position	on of the person in posses	ssion of committee
	Wojciechov	wski, Maria, , ,		
	Mailing Address	2465 Centreville Rd.		
		Ste J17-714		
		Herndon	VA 20171	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephone	number	
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of assistant treasurer).	the committee; and the	name and address of
	Full Name Wojciechov	wski, Maria, , ,		
	Mailing Address	2465 Centreville Rd.		
	-	Ste J17-714		
		Herndon	VA 20171	'
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephone	number	

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Title or Desition	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position		
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the committee deposits funds, however or maintains funds.	olds accounts, rents
Name of Bank, D	epository, etc.	
	Chain Bridge Bank	
Mailing Address		
		1
		ZIP CODE ▲
	CITY ▲ STATE ▲	ZIP CODE A
Name of Bank, D	epository, etc.	
	Wells Fargo Bank	
Mailing Address	8302 Woodmont Avenue	
	Bethesda MD 20814	<u> </u>
	CITY ▲ STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:			
1.		FEC ID r	number	С
2.		FEC ID r	number	C
3.		FEC ID r	number	С
4.		FEC ID r	number	С
ame of Any Connected	l Organization, Affiliated Committee, Join	nt Fundraising Repre	sentative	, or Leadership PAC Spon
WILLIAMS, BRAN	DON, McDonald, ,			
Mailing Address	PO Box 3580			
	Syracuse		NY	13220
Relationship:	CITY ▲	5	STATE A	ZIP CODE ▲
	Affiliated Committee fy by name, address (phone number – opt	Joint Fundraising F	Representa	tive X Leadership PAC Sp
	_	Joint Fundraising F	Representa	tive X Leadership PAC Sp
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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
		luiti Burnali	PAG G
PROTECT THE HO	Organization, Affiliated Committee, Joint Fund JSE 2024	araising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	ative Leadership PAC Sp
Connecte	od Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Sp
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h). Joint Fundrais i	ng Participant:		
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2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected NEW YORK MAJOR	I Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 183		
	HUDSON	WI WI	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	Leadership PAC Sp
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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spons
PROTECT THE HO	USE NEW YORK 2024		
	PO POV 20044		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi		t Fundraising Represent	
esignated Agent: Identi	ify by name, address (phone number – optional)		
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	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
TRANSPORTATION	ITRUST FUND		
Mailing Address	502 6TH STREET		
	HUDSON	WI	54016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte Con	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
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esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
Full NameMailing Address	CITY A	STATE A	ZIP CODE A
esignated Agent: Identi	CITY A	STATE A Telephone Number	ZIP CODE A
Full NameMailing Address	CITY A		ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Iomo of Any Connected	Organization, Affiliated Committee, Joint Fun	draining Penrocentative	or Londorphin DAC Span
GROW THE MAJOR		uraising nepresentative	. Of Leadership FAC Spons
Mailing Address	228 S WASHINGTON ST STE 115		
Relationship:	ALEXANDRIA	VA VA	22314 - -
neialionsnip.	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Jo y by name, address (phone number – optional)	int Fundraising Representa	Leadership 1710 op
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Full Name Mailing Address	ries: List all banks or other depositories in which intains funds.	STATE Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION And a green and a g	ries: List all banks or other depositories in which intains funds.	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:			
1.				FEC ID number	С
2. [FEC ID number	C
3. [FEC ID number	С
4. [FEC ID number	C
	of Any Connected O		nmittee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
N	Mailing Address	228 S Washington St.			
		Ste 115			
		Alexandria		VA	22314
F	Relationship:	CIT	Y ▲	STATE ▲	ZIP CODE ▲
8. Design	ated Agent: Identify b	Organization Affiliated Co		undraising Representa	ative Leadership PAC Sponsor
Ful	I Name				
Ма	iling Address				
		<u> </u>			
TI	TLE OR POSITION ▼	CITY	<u> </u>	STATE A	ZIP CODE A
TI	TLE OR POSITION V	, CITY		STATE A	ZIP CODE ▲
9. Banks safety of Name of Deposit		es: List all banks or other d	Tele	phone Number	ZIP CODE ZIP CODE s funds, holds accounts, rents
9. Banks safety of Name of Deposit	or Other Depositoried deposit boxes or main of Bank, tory, etc.	es: List all banks or other d	Tele	phone Number	

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EADERSHII	320 1ST ST SE	ated Committee, Join	FEC II	D number	C
EADERSHII	320 1ST ST SE	ated Committee, Join	FEC II	D number	C
EADERSHII	320 1ST ST SE	ated Committee, Join			
EADERSHII	320 1ST ST SE	ated Committee, Join	Fundraising Re	presentative,	or Leadership PAC Spons
EADERSHII	320 1ST ST SE	ated Committee, Join	t Fundraising Re	presentative,	or Leadership PAC Spons
ldress	320 1ST ST SE				
·	WASHINGTON				
·	WASHINGTON				
				DC	20003
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POSITION ▼		CITY A		STATE ▲	ZIP CODE ▲
			Telephone N	lumber	
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1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
EMMER MAJORITY	BUILDERS		
Mailing Address	824 S. MILLEDGE AVE. STE. 101		
	1		
	ATHENS	ı GA ı	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
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	Organization Affiliated Committee X Jo by name, address (phone number – optional)	int Fundraising Representa	ative Leadership PAC Spor
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Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	int Fundraising Representation	ZIP CODE A
Designated Agent: Identify Full Name	by name, address (phone number – optional)		

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

ng Address LE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲		ng Participant:		
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ENDS OF PFLUGER PO BOX 30844	4.		FEC ID number	С
ENDS OF PFLUGER PO BOX 30844				
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ationship: CITY STATE ZIP CODE Connected Organization Affiliated Committee		BETHESDA	MD .	20824
Connected Organization Affiliated Committee	Data to a letter			
ed Agent: Identify by name, address (phone number – optional) Name Ing Address CITY STATE ZIP CODE ZIP CODE A	Relationship:	CITY A	STATE A	ZIP CODE A
E OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲				
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	Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or name of Bank,	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g)	or(h). Joint Fundraisin	ıg Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	-	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	AMERICAN BATTLE	GROUND FUND		
	Mailing Address	PO BOX 30844		
		BETHESDA	MD MD	20824
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
8.		y by name, address (phone number – optional)		
8.	Designated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tele Tries: List all banks or other depositories in which the aintains funds.	ephone Number	s funds, holds accounts, rents