

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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2019 DEC -2 PM 12:40

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

I4PA

ADDRESS (number and street)

4835 41 Street

(Check if address is changed)

Sunnyside

CITY ▲

NY

STATE ▲

11104

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Iwachiw2020@gmail.com

Optional Second E-Mail Address

Iwachiw2001@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

I4PA.NYC

2. DATE 12 25 2019

3. FEC IDENTIFICATION NUMBER ► C1364703

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 Walter Iuschiw

Signature of Treasurer *Walter Iuschiw*

Date 11 25 2019

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 Only				
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

20191225 10:00 AM

Write or Type Committee Name

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

N/A

Mailing Address

[Empty address lines]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee 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

Walter N Iwachin

Mailing Address

48 35 41 Street

Sunny Side NYC

NY

11104

Title or Position

CITY

STATE

ZIP CODE

Candidate

Telephone number

347 239 0965

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

Walter N Iwachin

Mailing Address

[Empty address lines]

CITY

STATE

ZIP CODE

Title or Position

Telephone number

[Empty phone number line]

NONPROFIT ORGANIZATION

Full Name of Designated Agent

Walter N. Iwachuk

Mailing Address

[Empty address lines]

CITY

STATE

ZIP CODE

Title or Position

[Empty title line]

Telephone number

[Empty telephone line]

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.

ITA BANK

Mailing Address

41 01 Queens Blvd

Sunnyside

NY

11104

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

N/A

CITY

STATE

ZIP CODE

NONPROFIT ORGANIZATION

5(g) or (h) Joint Fundraising Participant:

1. _____

2. _____

3. _____

4. _____

FEC ID number C

FEC ID number C

FEC ID number C

FEC ID number C

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

Mailing Address

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

____-____-____

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.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

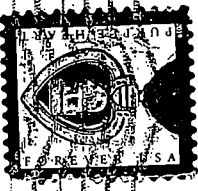
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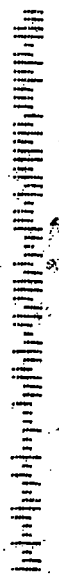
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Federal Election Commission

1050 First St NE

Washington DC 20463

20463-



Federal Election Commission
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
ES	12/2/19
PREPARER	DATE PREPARED

NOV 11 2019 10:10 AM