

NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions)

This form should be filed after the Committee qualifies as a multicandidate committee.

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1. (a) NAME OF COMMITTEE IN FULL LIFE OF THE PARTY PAC		2. FEC IDENTIFICATION NUMBER C00405639
(b) Number and Street Address 41 CHALLENGER DR		3. TYPE OF COMMITTEE (check one) <input type="checkbox"/> STATE PARTY <input checked="" type="checkbox"/> OTHER
(c) City, State and ZIP Code STATEN ISLAND, NY 10312		

I certify that one of the following situations is correct (complete line 4 or 5):

4. **STATUS BY AFFILIATION:** The committee submitted its Statement of Organization (FEC FORM 1) on _____ and simultaneously qualified as a multicandidate committee through its affiliation with:

Committee Name: _____

FEC Identification Number: _____

5. **STATUS BY QUALIFICATION:**

(a) **Candidates:** The committee has made contributions to the five (5) federal candidates listed below (ONLY State party committees may leave this blank.):

	Name	Office Sought	State/District	Date
(i)	Max Rose	House	NY-11	6/29/18
(ii)	Anthony Brindisi	House	NY-22	3/31/20
(iii)	Antonio Delgado	House	NY-19	3/31/20
(iv)	Josh Gottheimer	House	NJ-5	3/31/20
(v)	Yvette Clarke	House	NY-9	6/2/20

(b) **Contributors:** The committee received a contribution from its 51st contributor on: 3/26/2020

(c) **Registration:** The committee has been registered for at least 6 months. FEC FORM1 was submitted on: 8/31/2004

(d) **Qualification:** The committee met the above requirements on: ~~8/31/20~~ 6/2/20

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 NICK POPOLO	SIGNATURE OF TREASURER <i>Nick Popolo</i>	DATE June 12, 2020
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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.

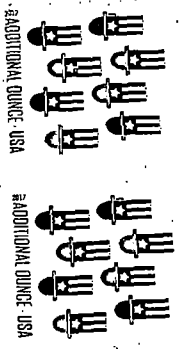
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For further information contact:
Federal Election Commission, Washington, DC 20463
Toll-free 800-424-9530
Local 202-694-1100

FEC FORM 1M
(Revised 1/2001)

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PREPARER *SPM*

7/6/20
DATE PREPARED

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