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. Corvi for Congress 12 Colesonian Drive ADDRESS (number and street) (Check if address is changed) Warwick 02888 RΙ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address info@corviforcongress.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) corviforcongress.com (Check if address is changed) DATE 2024 C00874024 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 Spearman, Raine,, Date 03 22 2024 Signature of Treasurer Spearman, Raine, , , 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

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TYPE OF COMMITTEE:			
Candidate Committee:			
(a) X This committee is a principal campaign committee. (Complete the candidate information below.)			
This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
Name of Candidate Corvi, Steven, J, ,			
Candidate Party Affiliation REP Office Sought: House Senate President	State RI District 02		
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Dictilict 02		
Name of Candidate			
Party Committee:			
(d) This committee is a (National, State (Democration or subordinate) committee of the Republican	ic, ı, etc.) Party		
Political Action Committee (PAC):			
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:		
Corporation Corporation w/o Capital Stock Labor C	Organization		
Membership Organization Trade Association Cooper	ative		
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 fund or par committee. (i.e., nonconnected committee)			
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 P	AC).		
In addition, this committee is a Lobbyist/Registrant PAC.			
Joint Fundraising Representative:			
This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
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			
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۱۸	Irite or Type Committee Name	2/2009)	raye 3	
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	Corvi for Congre		DAO Constant	
Ö.		ganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor	
	NONE			
	Mailing Address			
		CITY ▲ STATE ▲ ZIF	P CODE ▲	
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative Lead	dership PAC Sponso	
7.	Custodian of Records: Identi	fy by name, address (phone number optional) and position of the person in possession	of committee	
	Spearman,	Deire		
	Full Name			
	Mailing Adalas	PO Box #8588		
	Mailing Address			
		Warwick		
		OLTY A STATE A 711	2.0005.4	
	Title or Position ▼	CITY ▲ STATE ▲ ZIF	P CODE ▲	
	Treasurer	ı 914 _I 715	5 _{1 1} 2256 ₁	
	Treasurei	Telephone number		
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of	
	Full Name Spearman,	Raine, , ,		
	of Treasurer			
	Mailing Address	PO Box #8588		
		I		
		Warwick		
		CITY ▲ STATE ▲ ZIF	P CODE ▲	
Title or Position ▼				
			_ 2256	

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Full Name of Designated Agent	Provencher, Max, , , , , , , , , , , , , , , , , , ,				
Mailing Address	1 0 000 #0000				
	Warwick RI				
	CITY ▲ STATE	ZIP CODE ▲			
Title or Position		207 322 9169			
	Telephone number				
Banks or Other safety deposit bo	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.				
	Washington Trust				
Mailing Address	1473 Warwick Avenue				
	Warwick RI	02888			
	CITY ▲ STATE	▲ ZIP CODE ▲			
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲ STATE	▲ ZIP CODE ▲			