Image# 202201049474867551				01/04/2022 10 . 44
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4 🗕
			C	Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
John Matland for	Congress			
ADDRESS (number and street)	153 Brookfield Ave.			
(Check if address				
is changed)	Staten Island	· · · · · · · · · · · · · · · · · · ·	NY 10	308
			STATE ▲	
	-00			
	WeThePeopleAreThe™	lews@amail.com		
 (Check if address is changed) 				
	Optional Second E-Mail Ad	dress		
 (Check if address is changed) 				
	D / Y Y Y Y 3 2022			
3. FEC IDENTIFICATION N	UMBER ► C C	00799346		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
certify that I have examined t	his Statement and to the best	of my knowledge and belief i	t is true, correct an	d complete.
			,	
Type or Print Name of Treasure	er Matland, John, , ,			
Signature of Treasurer Matl	and, John, , ,	[Electronically Filed]	Date 01	/ D D / Y Y Y Y Z 2022
NOTE: Submission of false, error		may subject the person signing ON SHOULD BE REPORTED \		penalties of 2 U.S.C. §437
Office		For further information		FEC FORM 1
Use Only		Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	sion	(Revised 06/2012)

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		COMMITTEE		
Ca	ndidate	e Committee:		
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)		
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	he candidate	
	ne of ididate	Matland, John, , ,		
	ididate ty Affiliati	tion REP Sought: X House Senate President	tate	NY 11
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	ne of didate			
Pa	rty Con	nmittee:		
(d)		This committee is a (National, State or subordinate) committee of the (Demo Reput	ocratic, Ilican, etc.) Pa	arty.
Pol	itical A	Action Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization	is a:
		Corporation Corporation w/o Capital Stock	or Organizatio	n
		Membership Organization Trade Association Coo	perative	
		In addition, this committee is a Lobbyist/Registrant PAC.		
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segrega committee. (i.e., nonconnected committee)	ted fund or pa	arty
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Joir	nt Func	draising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or n committees/organizations, at least one of which is an authorized committee of a federal candidate.	nore political	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or n committees/organizations, none of which is an authorized committee of a federal candidate.	ore political	
	Com	nmittees Participating in Joint Fundraiser		
	1.	FEC ID number		
	2.	FEC ID number		
	3.	FEC ID number		
	4.	FEC ID number		

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Write or Type Committee Name

John Matland for Congress

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

N					
	Mailing Address				
		CITY		STATE	ZIP CODE
	Relationship: Connected	Organization Affiliated Con	nmittee Joint Fu	ndraising Representative	Leadership PAC Sponsor
7.	books and records.	ify by name, address (phone r	number optional) a	and position of the perso	n in possession of committee
	Matland, Jo	νhn,,,			
	Mailing Address	64 Ocean Rd.			
		Staten Island		NY	10308
	Title or Position	CITY		STATE	ZIP CODE
	Treasurer		Telepl	none number	702 8366

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	Matland, John, , ,		
Mailing Address	64 Ocean Rd.		
	Staten Island NY 10308 – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – – / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / <th <="" th=""> <th <="" th=""> /</th></th>	<th <="" th=""> /</th>	/
	CITY STATE ZIP CODE		
Title or Position	Telephone number 718 702 8366		

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Full Name of Designated Agent	Matland, John, , ,	
Mailing Address	64 Ocean Rd.	
	Staten Island NY 10308	
	CITY STATE ZIP CODE	
Title or Position		
	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.

Northfi	eld Bank	
Mailing Address	150 Greaves Lane	
	Staten Island	NY 10308 –
_	CITY	STATE ZIP CODE
Name of Bank, Depository,	etc.	
Mailing Address		
	CITY	STATE ZIP CODE