

FEC
FORM 1

STATEMENT OF ORGANIZATION

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1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

DYLAN RATIGAN for Congress

ADDRESS (number and street)

P.O. BOX 567

(Check if address
is changed)

LAKE PLACID NY 12946

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

ladrienne.ratigan@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

dylanratigan.com

2. DATE

03

20

2018

3. FEC IDENTIFICATION NUMBER ▶

C00671057

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

ADRIENNE D. RATIGAN

Signature of Treasurer

Adrienne D. Ratigan

Date

03

27

2018

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
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

1-800-485-1111

CERTIFIED MAIL

RATIG AN for Congress
PO BOX 567
Lake Placid, NY
12946

7017 3040 0000 2569 0505



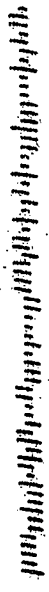
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PREPARER
 (3/2015)



3/27/18
 DATE PREPARED

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