Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Tom for Ohio 74 West Oakland Ave. ADDRESS (number and street) (Check if address is changed) Columbus 43201 OH CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address nextgroupup@aol.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00865170 FEC IDENTIFICATION NUMBER > 3. X 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 hwang, tom, , hwang, tom, , , 01 09 2024 Signature of Treasurer Date 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.)					
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
	Name of Candidate hwang, tom, , ,					
	Candidate Party Affiliation REP Office Sought: House Senate President	State OH District 02				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
	Party Committee:					
	(d) This committee is a (National, State or subordinate) committee of the Republican,	etc.) Party				
	Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization						
	Corporation Corporation w/o Capital Stock Labor Org	ganization				
	Membership Organization Trade Association Cooperation	ive				
	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 party 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 PAC	C).				
	In addition, this committee is a Lobbyist/Registrant PAC.					
	Joint Fundraising Representative:					
	(i) 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.					
	(j) 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					
	1					

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V	/rite or Type Committee Name				
	Tom for Ohio				
5 .	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	NONE	<u> </u>			
	Mailing Address				
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representation	ive Leadership PAC Sponso		
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of books and records. 					
	hwang, tom	,,,			
	Full Name	300 cherry st			
	Mailing Address				
		waverly	45690		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	treasurer	Telephone number	40 947 9027		
3.	Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of		
	Full Name hwang, tom	,,, , , , , , , , , , , , , , , , , , ,			
	Mailing Address	300 cherry st			
	-				
		waverly OH	45690		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	treasurer	74 Telephone number	40 947 9027		

FFC Form	1 (Revised 02/2009)		Page 4			
Full Name of			r ago i			
Designated Agent	ruzicka, julie, , ,					
Mailing Addres	2172 edwards rd					
	1					
	grove city	OH	43123			
Title or Positio	CITY ▲	STATE ▲	ZIP CODE ▲			
		Telephone number				
	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,	Name of Bank, Depository, etc.					
	huntington bank					
Mailing Address	4466 North high st					
	columbus	OH	43214 			
	CITY ▲	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
Mailing Addres						
	CITY ▲	STATE ▲	ZIP CODE ▲			