Only

PAGE 1 / 4 =

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. Paladino for Congress P.O. Box 5 ADDRESS (number and street) (Check if address is changed) Orchard Park CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS esoucia@darata.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.carlpaladino.com (Check if address is changed) DATE 2022 C00817270 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. Soucia, Eric, , , Type or Print Name of Treasurer Soucia, Eric,,, [Electronically Filed] 07 2022 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

E	C Form 1 (Revised 03/2022)	Page 2				
	TYPE OF COMMITTEE:					
	Candidate 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 the information below.)						
	Name of Candidate Paladino, Carl, Pasquale, ,					
	Party Affiliation REP Sought: * House Senate President	State NY				
	(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 org	anization is a:				
	Corporation Corporation w/o Capital Stock Labor Organization	zation				
	Membership Organization Trade Association Cooperative					
	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).					
	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.					
	(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					

	FEC Form 1 (Revised (2/2009)	Page 3		
٧	rite or Type Committee Name				
	Paladino for Co	ongress			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE				
	Mailing Address				
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	Organization	ve Leadership PAC Sponso		
	Tiolationomp.	Organization Constitution Const	Loadolellip 17to openeo		
	Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person i	n possession of committee		
	Soucia, Eri	<u>, </u>			
	Full Name	,,, 			
	Mailing Address	P.O. Box 5			
	Mailing Address				
		Orchard Park	14127		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	6 348 - 3228		
3.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of		
	Full Name Soucia, Eri	2, , ,			
	of Treasurer				
	Mailing Address	P.O. Box 5			
		Orchard Park	14127		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	6 - 348 - 3228		

FEC Forn	1 (Revised 02/2009)		Page 4			
Full Name of Designated						
Agent						
Mailing Addres	s					
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲			
	Telep	hone number				
	er Depositories: List all banks or other depositories in which the boxes or maintains funds.	committee deposits fund	ls, holds accounts, rents			
Name of Bank	Name of Bank, Depository, etc.					
	M&T Bank					
Mailing Addres	709 Elmwood Avenue					
	Buffalo	NY L	14222			
	CITY ▲	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
Mailing Addres	S					
	CITY ▲	STATE ▲	ZIP CODE ▲			