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FEC FORM 1		ORGA	EMENT ( NIZATIC			Office use only
1. NAME OF COMMITTEE (in t	full)	(Check if is change	name Ex d) ove	ample: If typying, type er the lines	12FE4M5	
Davis For Con	gress					
ADDRESS (number and s	street)	PO Box 2006				
(Check if addre	ess					
is changed)		Akron			<u>NY</u>	14001 -
COMMITTEE'S E-MAI	L ADDRESS		CITY	•	STATE	ZIP CODE
Islauson@dks	cpas.com					
COMMITTEE'S WEB	PAGE ADDR	ESS (URL)				The second se
COMMITTEE'S FAX N						<u></u>
7167598609	L L					
2. DATE <b>0</b>	/ <sup>D</sup> 2 3		Y			
3. FEC IDENTIFICA	TION NUMB	ER	Cc	0421909		
4. IS THIS STATEM	IENT X	NEW (N)	OR	AMENDED (A)		
I certify that I have exami	ned this Stater	nent and to the best	of my knowledge a	and belief it is true, correc	t and complete	
Type or Print Name of	Treasurer	Mr. Alan	J Davis			
Signature of Treasurer	Electronic	cally Filed by Mi	. Alan J Davis	3	Date <b>0</b> 1	/ <b>D D</b> / <b>Y Y Y Y Y Y</b>
NOTE: Submission of fal				t the person signing this S HOULD BE REPORTE		-
Office				For further information	on contact:	FEC FORM 1

Office		For further information contact:	
Use		Federal Election Commission	FEC FORM 1
Only		Toll Free 800-424-9530 Local 202-694-1100	(Revised 02/2003)

_	FEOForm 1 (Revised 02/2003)	Page <b>2</b>
5.	TYPE OF COMMITTEE (Check One)	
	(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 ca information below.)	ndidate
	Name of JOHN R DAVIS, Jr. Candidate I I I I I I I I I I I I I I I I	
	Candidate Office A House Senate President	State NY District 26
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	]
		nocratic, ublican,etc.) Party.
	(e) This committee is a separate segregated fund	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated function committee.	d or party
6.	Name of Any Connected Organization or Affiliated Committee	
	Mailing Address	
	CITYA STATEA Z	IP CODE 🛦
	Relationship	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock Labor Organization	n
	Membership Organization Trade Association Cooperative	

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9.	Banks or Other I safety deposit box	kes o	r ma	ainta	lins			ba	nks	or	oth	er	dep	osi	tori	es	in ۱	whi	ch⊺	the	CO	mm	itte	e d	epo	osit	s fu	nds	s, h	old	s a	cco	unt	s, r	ent	S			
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