FEC FORM 1		STATEMEN ORGANIZ	-	c	PAGE 1 / 12
1. NAME OF COMMITTEE (in fu	ull)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Nicole for Ne	ew Yor	K			
		O Box 60487			
ADDRESS (number and	street)				
(Check if add is changed)	dress				
	e l	Staten Island		NY 10	306
		CITY ▲		STATE ▲	ZIP CODE▲
COMMITTEE'S E-MAIL	ADDRESS				
(Check if add is changed)	dress I	auraschwartz99@gma	ail.com		
	0	ptional Second E-Mail Ad	dress		
	L				
COMMITTEE'S WEB P (Check if add is changed)		ESS (URL) icolemalliotakis.com			
2. DATE 02	/ D D 15	/ Y Y Y Y 2022			
3. FEC IDENTIFICA	tion nume	BER ► C C	00694778		
4. IS THIS STATEME	INT	NEW (N) OR	X AMENDED (A)		
I certify that I have exa	amined this S	Statement and to the best	of my knowledge and belief it i	is true, correct and	d complete.
Type or Print Name of	Treasurer	Schwartz, Laura, , ,			
Signature of Treasurer	Schwartz,	Laura, , ,	[Electronically Filed]	Date	/ D D / Y Y Y Y 10 2022
NOTE: Submission of fal			may subject the person signing the figure of the person signing the figure of the figu		penalties of 52 U.S.C. §30109
Office Use Only			For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEC	Form 1 (Revised 03/2022)	Page <b>2</b>
5. T`	YPE OF COMMITTEE:	
С	Candidate Committee:	
(a	a) 🗴 This committee is a principal campaign committee. (Complete the candidate information below.)	
(b	b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
	Name of Candidate	
	Candidate Office Party Affiliation REP Sought: House Senate President	State NY
(c	c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District 11
( -		
	Name of Candidate	
P	Party Committee:	
(d	d) This committee is a (National, State (Democr	atic, an, etc.) Party
P	Political Action Committee (PAC):	
(e	e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected organization is a:
	Corporation Corporation w/o Capital Stock	r Organization
	Membership Organization Trade Association Coop	perative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	ated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
,		
(g		
	In addition, this committee is a Lobbyist/Registrant PAC.	
(h	h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid	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.
 2.

In addition, this committee is a Lobbyist/Registrant PAC.

Relationship:

Connected Organization

	FEC Form 1 (Revised	02/2009)																			Pε	age	3		
V	Write or Type Committee Nam	ne																							
	Nicole for New	v York																							
6.	Name of Any Connected Malliotakis Victory (	-	ted C	ommi	ttee,	Joir	nt F	une	drai	sing	Re	pre	sen	tativ	/e,	or	Le	ade	rsh	ip I	PAC	: S	por	sor	
	Mailing Address	PO Box 68																							
		South Salem											N	Y 			10	)590	)			- [			
				CITY									STA	TE .					7	ZIP	СС	DE			

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

X Joint Fundraising Representative

Leadership PAC Sponsor

Affiliated Organization

S	chwartz, Laura, , ,			
Full Name				
Mailing Address	55 Overlook Drive			
	Ridgefield		CT 06877	
	CITY ▲		STATE 🔺	ZIP CODE
Title or Position <b>v</b>				
Treasurer		Telephone nu	umber 203 – [	241 - 5130

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	Schwartz, Laura, , ,
of Treasurer	
Mailing Address	55 Overlook Drive
	Ridgefield  CT  06877    Image: State of the state of th
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Telephone number  203 241 5130

FEC Form 1	(Revised 02/2009) Page <b>4</b>	-
Full Name of Designated Agent	Helmes, Miriamne, , ,	
Mailing Address	PO Box 68	
	South Salem      NY      10590	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position	•	
Finance	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.

Wells F	Fargo Bank		
Mailing Address	8302 Woodmont Ave		
	Bethesda	MD 20814	
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Depository,	etc.		
Truist			
Mailing Address	1909 K Street NW		
	Washington		
	CITY 🔺	STATE A	ZIP CODE

FFC	Form	<b>1S</b>	(Revised	02/2017)
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5(g) or (h).	Joint	Fundraising	Participant:

1	FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4	FEC ID number	С

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor TAKE BACK THE HOUSE 2022

1				
Mailing Address	PO BOX 30844			
-				
	BETHESDA			20824-0844
Relationship:	CITY	<b>A</b>	STATE 🔺	ZIP CODE
Connected	Organization Affiliated Com	nmittee 🗴 Joint	Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name					
Mailing Address					
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲					
			Telephone Number		

Name of Bank, Chain E Depository, etc.	Bridge Bank		
Mailing Address	1445-A Laughlin Ave		
	McLean	VA	
	CITY 🔺	STATE A	ZIP CODE 🔺

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5(g) or (h).	Joint	Fundraising	Participant:

1	FEC ID number	С
2.	FEC ID number	C
3.	FEC ID number	C
4	FEC ID number	C

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

				]
Mailing Address	228 S. WASHINGTON ST.			
	STE. 115			
				22314
Relationship:	CITY 🔺	<b>L</b>	STATE 🔺	ZIP CODE
Connected	Organization	mittee 🗴 Join	t Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																									
Mailing Address	L																								
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	L																						- [_		
TITLE OR POSITION	▼				C	SITY								S	TAT	E				ZIP	C	DD	E		
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Name of Bank, M&T Ba Depository, etc.	ank		
Mailing Address	2754 Hyland Blvd.		
	Staten Island	NY	10306
	CITY A	STATE A	ZIP CODE

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5(g) or (h).	Joint	Fundraising	Participant:
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1	FEC ID number	С
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3.	FEC ID number	C
4.	FEC ID number	C

# 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 2022 PHASE 1 PATRIOT DAY JFC

Mailing Address	228 S. WASHINGTON STREET	
	SUITE 115	
		VA 22314
Relationship:		STATE ▲ ZIP CODE ▲
Connected	Organization Affiliated Committee	X Joint Fundraising Representative

#### 8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																																		
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5(g) or (h).	JOIIII	Fundraising	Farticipant.

1. [	FEC ID number	С
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3.	FEC ID number	C
4.	FEC ID number	C

### 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor CARLOS AND NICOLE VICTORY COMMITTEE

Mailing Address	228 S. WASHINGTON ST.			
	STE. 115			
				22314
Relationship:	CITY	<b>A</b>	STATE 🔺	ZIP CODE
Connected	Organization Affiliated Cor	nmittee 🗙 Join	nt Fundraising Representative	Leadership PAC Sponsor

#### 8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																										
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Name of Bank, Depository, etc.																									
Mailing Address																									
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4	FEC ID number	C

# 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor WOMEN BUILD THE FUTURE

Mailing Address	228 S WASHINGTON ST		
	STE 115		
			22314
Relationship:		STATE 🔺	ZIP CODE
Connected 0	Organization Affiliated Committee	¥ Joint Fundraising Representative	Leadership PAC Sponsor

#### 8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																																
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4.	FEC ID number	C

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor FRIENDS OF GOP WINNING WOMEN 2022

Mailing Address											
	STE. 115										
			22314								
Relationship:	CITY 🔺	STATE 🔺	ZIP CODE								
Connected	Organization Affiliated Committee	X Joint Fundraising Representative	Leadership PAC Sponsor								

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name				
Mailing Address				
TITLE OR POSITION	•	CITY A	STATE A	ZIP CODE
		Teleph	one Number	

Name of Bank, Depository, etc.																													
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3.	FEC ID number
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# 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor HISPANIC LEADERSHIP TRUST PARTNERSHIP

Mailing Address	PO BOX 341027				]								
				TX 7873	34								
Relationship:		CITY A		STATE A	ZIP CODE								
Connected	Organization Affiliat	ed Committee	X Joint Fundraising	Representative	Leadership PAC Sponsor								

#### 8. Designated Agent: Identify by name, address (phone number - optional)

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3	FEC ID number	
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# 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 2022 PHASE 2 PATRIOT DAY JFC

Mailing Address	228 S. WASHINGTON STREET	
	SUITE 115	
		VA 22314 -
Relationship:		STATE ▲ ZIP CODE ▲
Connected	Organization Affiliated Committee	Joint Fundraising Representative

#### 8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																																	
Mailing Address																							1									1	
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