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| FEC FORM 1 | | | TATEMI RGANI | | | | | | | Office | Haa Oak | | | |
|---------------------------------------|---------------|--------------------------|---------------------------------|-------------|------------|--------------|------------|-----------|---------|--------|-----------|-----------|----------|----|
| 1. NAME OF COMMITTEE (ir | full) | , | Check if name changed) | | mple:If ty | ping, typ | е | 12FI | E4M5 | Office | Use Only | | | _ |
| Pennsylva | , | | | 1 1 1 1 | 1 1 1 | 1 1 1 | 1 1 | | 1 1 | | 1 1 | 1 1 1 | 1 1 | ı |
| | | | | | | | | | | | | | | _ |
| ADDRESS (number a | nd street) | 103 Sout | h Hanover Stre | et | | | | | | | | | | |
| (Check if ac is changed) | | Nanticok | e | | | | | PA | | 18634 | |] – [| | |
| | | | | CITY | | | | STATE | | | ZIP C | ODE | | |
| COMMITTEE'S E-MA (Check if is change | address d) | paforkar | ojorski@gmail.c | | dress) | | | | | | | | | |
| COMMITTEE'S WEB (Check if is change | address | L L L | RL) | | | | | | | | | | | |
| 2. DATE 00 | M / D = 6 | D / Y | 2012 | | | | | | | | | | | |
| 3. FEC IDENTIFIC | CATION NU | JMBER | С | C0018050 | 5 | | | | | | | | | |
| 4. IS THIS STATE | MENT X | NEW | (N) OR | | AMI | ENDED (| (A) | | | | | | | |
| I certify that I have e | | | nt and to the b | est of my l | knowledg | e and be | elief it i | s true, o | correct | and co | mplete. | | | |
| Signature of Treasure | Nancy T er | ^T . Kanjorski | | | [Electron | nically File | ed] | Date | M = N | / [| 06 | Y | 2012 | |
| NOTE: Submission of | | | mplete informat GE IN INFORM | • | | - | - | | | | alties of | 2 U.S. | C. §437(| J. |
| Office | | | | | | er informa | | | | FE | EC FC | DRM | 1 | |

| L | Office Use Only | | | | For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100 | FEC FORM 1 (Revised 02/2009) |
|---|-----------------------|--|--|--|---|---------------------------------|
|---|-----------------------|--|--|--|---|---------------------------------|

| F | FEC Fo | rm 1 (Revised 02/2009) | Page 2 |
|--------------|----------------|--|--------------------------------------|
| TYPE | E OF C | COMMITTEE | |
| Can | didate | e 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. (Comple information below.) | te the candidate |
| Name Cand | e of lidate | Paul E. Kanjorski | |
| | lidate | Office Sought: Y House Senate President | State |
| Party | Affiliati | on DEW Sought: X House Senate President | District 11 |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Name Cand | e of lidate | | |
| Part | ty Con | nmittee: | |
| (d) | | | emocratic, publican, etc.) Party. |
| Poli | tical A | action Committee (PAC): | |
| (e) | | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization or line 6.) | cted organization is a: |
| | | Corporation Corporation w/o Capital Stock | abor Organization |
| | | 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 segre committee. (i.e., nonconnected committee) | egated 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.) | |
| Join | t Fund | draising Representative: | |
| (g) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate. | or more political |
| (h) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate. | or more political |
| | Com | mittees Participating in Joint Fundraiser | |
| | 1. | FEC ID number | |
| | 2. | FEC ID number | |
| | 3. | FEC ID number | |
| | 4. | | |

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|---|--|---------------------|
| Write or Type Committee Nam | | . ago C |
| Pennsylvanians | s for Kaniorski | |
| • | Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership | p PAC Sponsor |
| NONE | | |
| | | |
| | | |
| Mailing Address | | |
| | | |
| | | |
| | CITY STATE Z | IP CODE |
| Relationship: Connecte | d Organization Affiliated Committee Joint Fundraising Representative Leader | ership PAC Sponsor |
| | | |
| Custodian of Records: Ide books and records. | ntify by name, address (phone number optional) and position of the person in posses | ession of committee |
| Mrs. Nano | cy M. Kanjorski | 1 |
| Full Name | ,103 South Hanover Street | |
| Mailing Address | | |
| | Nanticoke , PA , 18634 | |
| | Nanticoke PA 18634 | |
| Title or Position | CITY STATE ZI | P CODE |
| Administrator | Telephone number 570 – 82 | 25 6070 |
| 3. Treasurer: List the name ar any designated agent (e.g., | nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer). | e and address of |
| Full Name Nancy T. of Treasurer | Kanjorski | |
| Mailing Address | 117 South Prospect Street | |
| | | |
| | Nanticoke PA 18634 | |
| Title or Position | CITY STATE ZI | P CODE |
| Treasurer | | 6070 |

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|--|---|--------------------|
| | | |
| Full Name of Designated Agent | Peter A. Kanjorski | |
| Mailing Address | 145 East Broad Street | |
| | | |
| | Nanticoke PA 18634 | |
| | CITY STATE | ZIP CODE |
| Title or Position Assistant Treasu | surer | 825 - 6070 |
| Damka an Other | Paracitarias List all banks or other depositaries in which the committee deposits fixed. ball | da aaaa |
| safety deposit bo | | ds accounts, rents |
| safety deposit bo | oxes or maintains funds. | ds accounts, rents |
| safety deposit bo Name of Bank, [| oxes or maintains funds. Depository, etc. First National Bank of PA 120 Highland Blvd | ds accounts, rents |
| safety deposit bo | oxes or maintains funds. Depository, etc. First National Bank of PA 120 Highland Blvd | ds accounts, rents |
| safety deposit bo Name of Bank, [| oxes or maintains funds. Depository, etc. First National Bank of PA 120 Highland Blvd | ds accounts, rents |
| safety deposit bo | Depository, etc. First National Bank of PA 120 Highland Blvd | ds accounts, rents |
| safety deposit bo Name of Bank, [Mailing Address | Depository, etc. First National Bank of PA 120 Highland Blvd Wilkes-Barre PA 18702 | |
| safety deposit bo Name of Bank, [Mailing Address | Depository, etc. First National Bank of PA 120 Highland Blvd Wilkes-Barre PA 18702 | |
| safety deposit bo Name of Bank, [Mailing Address Name of Bank, [| Depository, etc. First National Bank of PA | |
| safety deposit bo Name of Bank, [Mailing Address Name of Bank, [| Depository, etc. First National Bank of PA | |
| safety deposit bo Name of Bank, [| Depository, etc. First National Bank of PA | |