Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Alexandra Chandler for Congress 180 Lawrence Street ADDRESS (number and street) (Check if address is changed) Haverhill 01830 MA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS alex@alexandrachandler.com (Check if address is changed) Optional Second E-Mail Address stevenrchandler@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.alexandrachandler.com (Check if address is changed) DATE 2017 C00660597 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. Chandler, Steven, , , Type or Print Name of Treasurer Chandler, Steven, , , [Electronically Filed] 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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

	<b>-</b>	1 (7)	5 0				
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		OMMITTEE • 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.)					
Nam Cand	e of didate	Chandler, Alexandra, , ,					
	didate / Affiliati	on DEM Office Sought: <b>X</b> House Senate President	State MA District 03				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Nam Cand	e of didate						
Par	ty Con	nmittee:					
(d)		(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:				
		Corporation Corporation w/o Capital Stock	Labor 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 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.)					
Join	t Fund	raising Representative:					
(g)		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.					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political				
	Com	Committees 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							
Alexandra Cha	ndler for Congress						
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	p PAC Sponsor					
NONE							
Mailing Address							
		. 1-1					
	CITY STATE Z	IP CODE					
ъ		L: D400					
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor					
<ol> <li>Custodian of Records: Idea</li> <li>books and records.</li> </ol>	entify by name, address (phone number optional) and position of the person in posse	ession of committee					
Chandler, Steven, , ,							
Full Name	,79 Hemlock Drive						
Mailing Address							
	Attleboro MA 02703						
Title or Position	CITY STATE ZI	P CODE					
Custodian of Records		1.1					
	Telephone number						
3. <b>Treasurer:</b> List the name a	nd address (phone number optional) of the treasurer of the committee; and the name	e and address of					
any designated agent (e.g.,	assistant treasurer).						
Full Name Chandler of Treasurer	Steven, , ,						
Mailing Address	79 Hemlock Drive						
	Attleboro MA 102703	-					
	CITY STATE ZI	P CODE					
Title or Position Treasurer	Telephone number						

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Full Name of Designated Agent Chand	dler, Catherine, , ,						
Mailing Address	180 Lawrence St						
	Haverhill CITY	MA 01:	830 ZIP CODE				
Title or Position Assistant Treasurer		ephone 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, Depository, etc.							
Pen	tucket Bank  Merrimack Street Branch						
Mailing Address	One Merrimack Street		1				
	Haverhill	MA 018	831				
	CITY	STATE	ZIP CODE				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY	STATE	ZIP CODE				