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FEC FORM 1

STATEMENT OF **ORGANIZATION**

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2023 JUN 26 AM 9: 27

			Office Use Only	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
[Pigiui] IVIIIniciei	niti iCiaitiainieisi	e Fior Piries	i dent	
ADDRESS (number and street)	[6,2,5, 15, 1P10,P1	lar, St.		
☐ ◀ (Check if address is changed)				
	(Wilchita) CITY▲		STATE \triangle $\begin{bmatrix} 6,7,2,1,1 \\ 2,8,2,8 \end{bmatrix}$ $\begin{bmatrix} 2,8,2,8 \\ 2,8,2,8 \end{bmatrix}$	
COMMITTEE'S E-MAIL ADDRE	SS			
☐ ◀ (Check if address is changed)	Ipia will Citible p	a ulichannell	\cdot $ C_{ O }m_{ }$	
is changed,	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE AD (Check if address is changed)		P _I a u l . C o m		
2. DATE 06 20 2023				
3. FEC IDENTIFICATION NUMBER ▶ C				
4. IS THIS STATEMENT W 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.				
Type or Print Name of Treasurer Paul Vincent Catanese				
Signature of Treasurer	Todo.		Date 0 b 2 0 2 3	
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 Use Only		For further Information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		

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. TYPE OF COMMITTEE:				
Candidate Committee:				
(a) This committee is a principal of	campaign commit	tee. (Complete the cand	idate information be	elow.)
(b) This committee is an authorize information below.)	ed committee, and	d is NOT a principal car	mpaign committee.	(Complete the candidate
Name of Candidate Paully	cieiniti	C ₁ a ₁ t ₁ a ₁ n ₁ e ₁ s ₁ e		
Candidate Party Affiliation	Office Sought:	House Se	nate Pre	State esident District
(c) This committee supports/oppo	ses only one can	didate, and is NOT an a	authorized committe	
Name of Candidate				
Party Committee:	(National	State		(Democratic,
(d) This committee is a		finate) committee of the		Republican, etc.) Party
Political Action Committee (PAC) :			
(e) This committee is a separate	segregated fund.	(Identify connected orga	nization on line 6.)	Its connected organization is a
Corporation	П	Corporation w/o Capital	Stock	Labor Organization
Membership Organization	П	Trade Association		Cooperative
In addition, this com	mittee is a Lobby	vist/Registrant PAC.	•	_
(f) This committee supports/oppo committee. (i.e., nonconnected		ne Federal candidate, an	nd is NOT a separa	ite segregated fund or party
In addition, this com	mittee is a Lobby	vist/Registrant PAC.		
In addition, this com	mittee is a Leade	ership PAC. (Identify spo	nsor on line 6.)	
(g) This committee is an independ	lent expenditure-	only political committee	(Super PAC).	
In addition, this com	mittee is a Lobby	vist/Registrant PAC.		
(h) This committee is a political c	ommittee with bo	th contribution and non-	contribution accoun	its (Hybrid PAC).
In addition, this com	mittee is a Lobby	rist/Registrant PAC.		
Joint Fundraising Representative):			
(i) This committee collects contril committees/organizations, at le	outions, pays fund	• .	•	•
(j) This committee collects contril committees/organizations, non-	· ·	-		
Committees Participating in Joint F	undraiser			
1.		1	C	**************************************
1				4 4 4 4 4 4 4 4

	FEC Form 1 (Revised	<u>·</u>		Page 3
٧	Vrite or Type Committee Nam	_		
Paul Vincent Cotanese For President 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership				
	14/A			
	[⁷ / ₁ ⁷ / ₁ 1 1 1 1 1 1 1 1 1	 	 	<u> </u>
		 		
	Mailing Address			
			لبا	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connecte	ed Organization Affiliated Organization Joint Fundraisin	ng Representativ	ve Leadership PAC Sponso
	_	_		
 7.	Custodian of Records: Ide	entify by name, address (phone number optional) and position	of the person in	n possession of committee
	Full Name	11, Viincent Catanese	1 1 1 1 1	
	Mailing Address	6,2,5, S, P,0,p,1,a,r, S,t,	J. I. I I I	<u> </u>
		1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 1 1 1 1	
		$W_{i, C, h}$	K 'Z	16,7,2,1,1,-12,8,2,8
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼	3.11 =	OTATE =	211 0002 =
	· Tirieiaisiuirieir	Telephone nu	mber [3]/	16-371-0,96,7
8.	Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of th ., assistant treasurer).	e committee; a	and the name and address of
	Full Name of Treasurer	11 Viincent Caltainese	<u> </u>	
	Mailing Address	16,25, 15, 1P101P1/1917 Siti		
			<u> </u>	
		$[W_{i}]_{C_{i}}h_{i}$	[K,5]	16,7,2,1,1,-12,8,2,8
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼	=	u —	3002
	Tirjeasurjeir	Telephone nu	mber [3]/	16]-[3,71]-[0,9,6,7

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Full Name of Designated Agent	Monelliiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	
Mailing Address		
Title or Position	CITY ▲ STAT	E ▲ ZIP CODE ▲
	Telephone number	
	Depositories: List all banks or other depositories in which the committee depoxes or maintains funds.	posits funds, holds accounts, rents
Name of Bank,	Depository, etc.	
	[Eigiuity, BianK, , , , , , , , , , , , , , , , , , ,	
Mailing Address	[7,7,0,1, 1E, Kiell, 1,0,9,9, Dir.	
	[S,u,i,t,e, 1,0,0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Wiichita K	5 [6,7,2,0,7]-[1,7,1,3]
	CITY ▲ / STAT	E ▲ ZIP CODE ▲
Name of Bank,	Depository, etc.	
Mailing Address		
	CITY ▲ STAT	E ▲ ZIP CODE ▲

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Federal Election Commission 1050 First Street, N.E. Washington, DC 20463

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(4/2023)		DATE PREPARED