FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instruction:	_	N					Office u	ao anly			
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Exar over	nple: If typyii the lines	ng, type	12	2FE4	1 1	Office u	Se Offiy			
Powers for Co	ngress										ш	لــــــــــــــــــــــــــــــــــــــ	لب
											ш	Ш	لــــا
ADDRESS (number and	street) 2601	Woodley Place,	NW, 10	1 							ш		Ш
X (Check if addr is changed)		nington				L	DC	L		20008] _ [_	ш Ш	
			CITY			STA	ATE.			ZIP C	ODE	_	
COMMITTEE'S E-MA	IL ADDRESS orÇongress.com												
											Ш	ш	Щ,
							ш	ш	ш		ш	ш	Щ
COMMITTEE'S WEB	PAGE ADDRESS (U	RL)											
http://www.Po	owersforCongress	s.com 								1 1	1 1	ш	ш
		<u> </u>			111	11	11				11	ш	ш
COMMITTEE'S FAX N 7166336460	NUMBER	Ь											
2. DATE 0.2	/ D D / Y	2009											
3. FEC IDENTIFICA	ATION NUMBER	C	C00	435750									
4. IS THIS STATEM	MENT NEW	(N) OR	X	AMEN	DED (A)								
I certify that I have exam		•		d belief it is tr	ue, correct	and cor	mplete						
Type or Print Name of	TreasurerV	Villiam P. Keefer											
Signature of Treasurer	. Electronically File	d by William P.	Keefer			Date		0 2 0	/ D	10	Y	Ý 2 0) 0 9 ·
NOTE: Submission of fa		plete information may							es of 2	U.S.C.	S437g	l-	
Office Use Only				For further Federal Elec Toll Free 80 Local 202-69	tion Comm 0-424-9530	ission	ct:			EC F(

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5. TYPE OF C	OMMITTEE (Check One) 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 information below.)	ne candidate
Name of Candidate	Jonathan Powers	
Candidate Party Affiliat	ion OTH Office X House Senate President	State NY District 26
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Comr		
(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
Political Ac	tion Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	Corporation Corporation w/o Capital Stock Lab	oor Organization
	Membership Organization Trade Association Co	operative
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	fund or party
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundr	aising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
Con	nmittees Participating in Joint Fundraiser	
	1. FEC ID number C	
	2 FEC ID number C	
	3. FEC ID number	
	4. FEC ID number	
	5 FEC ID number C	

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Write or Type Committee Name			
Powers for Congress			
6. Name of Any Connected Or	rganization, Affiliated Committee, Leadership PA	C Sponsor or Joint Fundraisi	ng Representative
IA Vets for Congress			
<u> </u>	<u> </u>		1 1 1 1 1 1 1
Mailing Address	303 Park Avenue, South		
	New York	NY L	10010 _ [
	CITY▲	STATE ≜	ZIP CODE 🛕
Relationship:			
Connected Organization	Affiliated Committee Leadersh	ip PAC Sponsor X Joint	Fundraising Representative
possession of Committee Full Name Mailing Address	PO Box 46		
	Williamsville	NY	14231
Title or Position ▼ Custodian	CITY A n of Records	STATE A 716	ZIP CODE 4 - 633 - 6068
	e and address (phone number optional) of the designated agent (e.g., assistant treasurer)		tee; and the
Full Name of Treasurer Willian	m P. Keefer		
Mailing Address	PO Box 46		
	Williamsville	NY	14231
Title or Position ♥	CITY A	STATE ▲	ZIP CODE A
Treasure	r _T	elephone number	_ 866 _ 7694

Full Name of Dosignated Agent Mailing Address Title or Position ▼ CITY A STATE A ZIP CODE A Telephone number — — — — — — — — — — — — — — — — — — —		FEC Form 1 (F	Revised 12/2007)		Page 4
Title or Position ▼ CITY A STATE A ZIP CODE A Telephone 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. Bank of America Bank of America Williamsville Ny 14231 — — CITY A STATE ZIP CODE A Name of Bank, Depository, etc.		Designated			
Banks or Other Depositories: safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Bank of America Williamsville Villiamsville CITY A STATE A ZIP CODE A Mailing Address Mailing Address		Mailing Address			
Banks or Other Depositories: safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Bank of America Williamsville Villiamsville CITY A STATE A ZIP CODE A Mailing Address Mailing Address					
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. Bank of America Williamsville CITY \(\text{A}\) STATE \(\text{A}\) ZIP CODE \(\text{A}\) Mailing Address Mailing Address		Title or Position ▼	CITY A	STATE A	ZIP CODE A
Safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Bank of America Samk of America			Tele	phone number	
Mailing Address STATE	9.	safety deposit boxes	or maintains funds. sitory, etc.	committee deposits funds, hold	s accounts, rents
Williamsville CITY STATE ZIP CODE Name of Bank, Depository, etc. Mailing Address		L			
CITY A STATE A ZIP CODE A Name of Bank, Depository, etc. Mailing Address		Mailing Address			
CITY A STATE A ZIP CODE A Name of Bank, Depository, etc. Mailing Address					
Name of Bank, Depository, etc. Mailing Address Mailing Address			Williamsville	NY NY	14231
Mailing Address Mailing Address			CITY 🗻	STATE △	ZIP CODE 🛕
Mailing Address		Name of Bank, Depos	sitory, etc.		
CITY STATE ZIP CODE		Mailing Address			
CITY A STATE A ZIP CODE A					
CITY STATE ZIP CODE A					
			CITY 🙇	STATE △	ZIP CODE 🛕

Banks or Other Depositories: safety deposit boxes or maintain:	List all banks or other depositories in which the commi	ittee deposits funds, hold	s accounts, rents
Name of Bank, Depository, etc.		Ī	ADDITIONAL]
Mailing Address			
	CITY 🛕	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Leadership PAC Spon	nsor or Joint Fundraisir	[ADDITIONAL] ng Representative
Rangel Victory Fund			
Mailing Address	818 Connecticut Avenue, NW		
	Suite 1100		
	Washington		20006
Relationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Leadership PAC Spo	nsor X Joint Fund	raising Representative
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ♥	CITY A	STATE ▲	ZIP CODE A
	Teleph	one number	
Joint Fundraiser Participant	·		[ADDITIONAL]
	, , , , , , , , , , , , , , , , , , ,	EC ID number C	• • • • • • • • • • • • • • • • • • • •
		_C ID Humbol	

safety deposit boxes or maintain Name of Bank, Depository, etc.	s runus.	I	ADDITIONAL 1
Washin			ADDITIONAL]
vvasnin	gton First Bank		
	1025 Connecticut Avenue, NW		
Mailing Address			
	Washington	DC	20036
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	anization, Affiliated Committee, Leadership PAC Sp	oncor or Joint Fundraisir	[ADDITIONAL
Name of Any Connected Orga	inization, Anniated Committee, Leadership FAC Sp	onsor or some rundraism	ig nepresentative
Mailing Address			
utionship:	CITY▲	STATE ▲	ZIP CODE
Connected Organization	Affiliated Committee Leadership PAC S	ponsor Joint Fund	raising Representative
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE ∆	ZIP CODE A
	Tele	phone number	
			[ADDITIONAL]