Only

PAGE 1 / 4 =

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Brittany for the People 7504 5th Avenue ADDRESS (number and street) 1st Floor (Check if address is changed) Brooklyn 11209 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS markjhanna@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.brittanyforthepeople.org (Check if address is changed) DATE 04 2021 C00769059 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. Hanna, Mark, , , Type or Print Name of Treasurer Hanna, Mark,,, [Electronically Filed] 06 2021 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

F	EC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>				
		COMMITTEE					
Can		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. (Corinformation below.)	nplete the candidate				
Name Cand		Ramos DeBarros, Brittany, , ,					
Cand Party	lidate Affiliati	on DEM Office Sought: * House Senate President	State NY District 11				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand							
Part	y Con	nmittee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, 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 is					
		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 s committee. (i.e., nonconnected committee)	egregated 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 Func	draising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political				
	Com	mittees Participating in Joint Fundraiser					
	1.						
	2.						
	3.	FEC ID number					
	4.						

FEC <b>Form 1</b> (Revised 0	02/2009)			Page <b>3</b>						
Write or Type Committee Name										
Brittany for the People										
<u> </u>	organization, Affiliated Committee, Joint Fun	draising Represe	entative, or Leaders	ship PAC Sponsor						
LEAD THE WAY 2022										
Mailing Address	2828 N. CENTRAL AVE									
	FLOOR 10		AZ 85004							
	CITY		STATE	ZIP CODE						
Relationship: Connected	d Organization Affiliated Committee	nt Fundraising Re	presentative Le	eadership PAC Sponsor						
Custodian of Records: Iden books and records.	tify by name, address (phone number option	nal) and position	of the person in po	ssession of committee						
Full Name  Hanna, Ma	7504 5th Avenue									
Ü	1			1						
	Brooklyn		NY 11209							
Title or Position	CITY	ST	TATE	ZIP CODE						
Treasurer		Felephone number	732	614   -   1288						
3. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer).	easurer of the co	mmittee; and the na	ame and address of						
Full Name Hanna, Ma of Treasurer	rk, , ,									
Mailing Address	7504 5th Avenue									
	Brooklyn		NY 11209 ATE	ZIP CODE						
Title or Position Treasurer		elephone number	, 732	614   -   1288						

FEC Form	1 (Revised 02/2009)	Page <b>4</b>					
Full Name of Designated Agent	Younus, Abdullah, , ,						
Mailing Address	303 99th Street						
	Apt. 5B						
	Brooklyn NY 11209  CITY STATE Z	IP CODE					
Title or Position							
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.  TD Bank							
Mailing Address	8206 5th Avenue						
<u> </u>							
	Brooklyn NY 11209						
	CITY STATE Z	IP CODE					
	anagitary eta						
Name of Bank, D	epository, etc.						
Name of Bank, D	epositor y, etc.						
Name of Bank, E							
	Epository, etc.						