PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 X COMMITTEE (in full) over the lines. is changed) Erik Bonnett for PA 110 Village Drive ADDRESS (number and street) (Check if address is changed) Blandon 19510 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS erikbonnett@outlook.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) erikbonnett.com (Check if address is changed) DATE 2023 C00842989 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Colon, Dominic, , , Type or Print Name of Treasurer Colon, Dominic, , , [Electronically Filed] 06 2023 Signature of Treasurer Date 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. **FEC FORM 1** (Revised 06/2012)

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530 Local 202-694-1100

TYPE OF COMMITTEE: Candidate Committee: (a) This committee is an authorized committee, and is NOT 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.) Name of Candidate DEM Sought Note Senate President District O4 Name of Candidate DEM Office Sought Note Senate President District O4 Name of Candidate DEM Office Sought Note Senate President District O4 Name of Candidate DEM Office O4 Name of Candidate OFFICE O5 O5 Candidate O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 Candidate O5 O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 O5 O5 Name of Candidate O5 O5 O5 O5 O5 O5 O5 O	EC Form 1 (Revised 03/2022)	Page 2
(a) This committee is a principal campaign committee. (Complete the candidate information below.) Name of Candidate Bonnett, Erik, Candidate Bonnett, Erik, Candidate Bonnett, Erik, Candidate Bonnett, Erik, Candidate Committee Committee	TYPE OF COMMITTEE:	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Bonnett, Erik, , , Candidate Bonnett, Erik,	Candidate Committee:	
Information below.) Name of Candidate Party Affiliation Party Committee: (d) This committee is a	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
Candidate Candidate Candidate Candidate Party Affiliation DEM Office Sought: House Senate President District Od Od This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (I) This committee is a (National, State or subordinate) committee of the Republican, etc.) Party Political Action Committee (PAC): (B) This committee is a separate segregated fund. (identify connected organization on line 6.) Its connected organization Membership Organization Trade Association Membership Organization In addition, this committee is a Lobbyist/Registrant PAC. (T) 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 Lobbyist/Registrant PAC. (h) This committee is a political committee is a Lobbyist/Registrant PAC. In addition, this committee is a Lobbyist/Registrant PAC. (h) This committee is a political committee is a Lobbyist/Registrant PAC. This committee is a political committee is a Lobbyist/Registrant PAC. Joint Fundraising Representative: 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. Committee Participating in Joint Fundraiser		ete the candidate
Party Affiliation DEM Sought:	IDOHHEU. EHK	
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Party Committee: (d) This committee is a (National, State or subordinate) committee of the Pach: Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a: Corporation Corporation Corporation Corporation Cooperative 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.) This committee is an independent expenditure-only political committee (Super PAC). In addition, this committee is a Lobbyist/Registrant PAC. In addition, this committee is a Lobbyist/Registrant PAC. This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC). In addition, this committee is a Lobbyist/Registrant PAC. 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. Committees Participating in Joint Fundraiser	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	0,7
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committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	· ·
	()	two or more political
1. C	Committees Participating in Joint Fundraiser	

FEC Form 1 (Revised	1 02/2009)	Page 3					
Vrite or Type Committee Nan	ne						
Erik Bonnett f	or PA						
	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor						
Mailing Address							
		1					
	CITY A STATE A	ZIP CODE ▲					
Relationship: Connected	ed Organization Affiliated Organization Joint Fundraising Represent	ative Leadership PAC Spons					
Custodian of Records: Ide books and records.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.						
Colon, D	ominic, , ,						
Full Name							
Mailing Address	3996 Penn Avenue	<u> </u>					
	Apartment B						
	Reading PA	19608					
	CITY ▲ STATE ▲	ZIP CODE ▲					
Title or Position ▼							
Treasurer	Telephone number	484 - 707 - 2343					
		; and the name and address of					
of Treasurer	S.III						
Mailing Address	3996 Penn Avenue						
Mailing Address	Apartment B						
	Reading PA	19608					
	CITY ▲ STATE ▲	ZIP CODE ▲					
Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲					
	Full Name Treasurer: List the name a any designated agent (e.g., Full Name Crik Bonnett f Name of Any Connected NONE Conn	Mailing Address CITY ▲ STATE ▲ Relationship: Connected Organization Affiliated Organization Joint Fundraising Represent. Custodian of Records: Identify by name, address (phone number optional) and position of the person books and records. Colon, Dominic, , , Full Name Mailing Address Apartment B Reading CITY ▲ STATE ▲ Title or Position ▼ Treasurer: List the name and address (phone number optional) of the treasurer of the committee any designated agent (e.g., assistant treasurer). Full Name Of Treasurer Colon, Dominic, , , Colon, Dominic, , , Colon, Dominic, , , Colon, Dominic, , , Colon, Dominic, , ,					

	FEC Form 1	(Revised 02/2009)		Page 4
	Full Name of Designated			
,	Agent			
ı	Mailing Address			
-	Title or Position ▼	CITY A	STATE ▲	ZIP CODE ▲
		Telephone nui	mber	
E	Banks or Other losafety deposit box	Depositories: List all banks or other depositories in which the committees or maintains funds.	ee deposits fu	unds, holds accounts, rents
١	Name of Bank, D	epository, etc.		
		Tompkins Community Bank		
N	Mailing Address	100 Plaza Drive		
		Blandon	PA	19510
		CITY A	STATE ▲	ZIP CODE ▲
1	Name of Bank, D	epository, etc.		
N	Mailing Address			
		CITY ▲	STATE ▲	ZIP CODE ▲