Only

## STATEMENT OF

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**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. Committee to Elect Eric Ding 2200 Wilson Blvd, Suite 102-554 ADDRESS (number and street) (Check if address is changed) Arlington 22201 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS contact@ericding4congress.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.ericding4congress.com (Check if address is changed) DATE 2019 C00671107 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. Feigl-Ding, Eric, , , Type or Print Name of Treasurer Feigl-Ding, Eric, , , [Electronically Filed] 09 26 2019 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

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		OMMITTEE	
		e Committee:	
(a)	x	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
Nam Cand	e of didate	Feigl-Ding, Eric, , ,	
	didate / Affiliati	on DEM Office Sought: House Senate President	State
			District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)			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 con-	nected 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 se committee. (i.e., nonconnected committee)	gregated 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 Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees 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		
Committee to E	Elect Eric Ding	
	Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representa	ative Leadership PAC Sponsor
. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the p	erson in possession of committee
Feigl-Ding	g, Eric, , ,	
Full Name Mailing Address	2200 Wilson Blvd, Suite 102-554	
	Arlington	22201
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name Feigl-Ding of Treasurer	g, Eric, , ,	
Mailing Address	2200 Wilson Blvd, Suite 102-554	
	Arlington	22201
Title or Position	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1.1
	Telephone number	
Name of Bank,  Mailing Address	Orrstown Bank 77 East King Street	
	Shippensbura	
	Shippensburg PA 17257	
	Shippensburg PA 17257  CITY STATE	ZIP CODE
Name of Bank,	CITY STATE	ZIP CODE
Name of Bank,	CITY STATE	ZIP CODE
Name of Bank, Mailing Address	CITY STATE  Depository, etc.	ZIP CODE
	CITY STATE  Depository, etc.	ZIP CODE
	CITY STATE  Depository, etc.	ZIP CODE