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. VOTE BIG-VOTE JAMES BALDINI 15 DEVITA ROAD ADDRESS (number and street) (Check if address is changed) BRANCHVILLE 07826 NJ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS AUTHORJAMESBALDINI@GMAIL.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) jamesbaldiniforcongress.com (Check if address is changed) DATE 29 2019 C00705053 FEC IDENTIFICATION NUMBER > 3. 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. Baldini, James, , Mr., Type or Print Name of Treasurer Baldini, James, , Mr., [Electronically Filed] 09 29 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

FEC	Form 1 (Revised 02/2009)	Page 2
	COMMITTEE	
	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Name of	This committee is an authorized committee, and is NOT a principal campaign committee. (Completinformation below.) Baldini, James, , ,	te the candidate
Candidate		
Candidate Party Affil		State NJ
		District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	ommittee: (National, State	emocratic,
(d)	· · ·	epublican, etc.) Party.
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected 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 segrecommittee. (i.e., nonconnected committee)	egated 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.)	
Joint Fu	ndraising 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.	or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Co	ommittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.		
3.		
4		

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Write or Type Committee Name	3	
VOTE BIG-VOT	ΓΕ JAMES BALDINI	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
NONE		<u> </u>
Mailing Address		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representa	Leadership PAC Sponsor
. Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the pe	erson in possession of committee
	mes, , Mr.,	
Full Name	₁ 15 DEVITA RD	
Mailing Address		
	BRANCHVILLE	07826511
Title or Position	CITY STATE	ZIP CODE
	Telephone number	362 - 266 - 7392
B. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name Baldini, Januari Baldini, Baldin	mes, , Mr.,	
Mailing Address	15 DEVITA RD	
	BRANCHVILLE	07826511
Title or Position	CITY STATE	ZIP CODE
	Telephone number	362 - 266 - 7392

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Full Name of Designated Agent	<u> </u>	
Mailing Address		
J 22.000		
	CITY STATE	ZIP CODE
Title or Position		
Banks or Other safety deposit bo Name of Bank, I		s accounts, rents
safety deposit bo	Depository, etc. Sussex Bank P.O. Box 353	s accounts, rents
safety deposit bo Name of Bank, [Depository, etc. Sussex Bank	s accounts, rents
safety deposit bo Name of Bank, [Depository, etc. Sussex Bank P.O. Box 353 Franklin NJ 07416	zip code
safety deposit bo Name of Bank, [Exes or maintains funds. Depository, etc. Sussex Bank P.O. Box 353 Franklin NJ 07416 CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Exes or maintains funds. Depository, etc. Sussex Bank P.O. Box 353 Franklin NJ 07416 CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Exes or maintains funds. Depository, etc. Sussex Bank P.O. Box 353 Franklin NJ 07416 CITY STATE	
Safety deposit bo Name of Bank, I Mailing Address	Exes or maintains funds. Depository, etc. Sussex Bank P.O. Box 353 Franklin NJ 07416 CITY STATE	
Safety deposit bo Name of Bank, I Mailing Address	Exes or maintains funds. Depository, etc. Sussex Bank P.O. Box 353 Franklin NJ 07416 CITY STATE	