

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

LEGNANI FOR CONGRESS

ADDRESS (number and street) 32 OVERHILL DR

(Check if address is changed)

BERLIN

CITY ▲

CT

STATE ▲

06037

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

legnaniforus@gmail.com

Optional Second E-Mail Address

Andrewlegnani@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

https://legnaniforcongress.com/

2. DATE

04 / 11 / 2021

3. FEC IDENTIFICATION NUMBER ▶

C C00764688

4. 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.

Type or Print Name of Treasurer Amar, Sivan, Estee, ,

Signature of Treasurer

Amar, Sivan, Estee, ,

[Electronically Filed]

Date

04 / 11 / 2021

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 Use Only

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

FEC FORM 1 (Revised 06/2012)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) 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 candidate information below.)

Name of Candidate Legnani, Andrew, , ,

Candidate Party Affiliation D/C Office Sought: House Senate President State CT District 01

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

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 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 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.)

Joint Fundraising Representative:

- (g) 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.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C _____
2. _____ FEC ID number C _____
3. _____ FEC ID number C _____
4. _____ FEC ID number C _____

Write or Type Committee Name

LEGNANI FOR CONGRESS

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

LEGNANI FOR CONGRESS

Mailing Address

32 OVERHILL DR

BERLIN

CT

06037

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Legnani, Andrew, Joseph, ,

Mailing Address 32 Overhill Dr.

Berlin

CT

06037

Title or Position

CITY

STATE

ZIP CODE

Candidate

Telephone number 860 - 559 - 7256

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Amar, Sivan, Estee, ,

Mailing Address 18 Mechanic St

Apt 1

New Haven

CT

06511

CITY

STATE

ZIP CODE

Title or Position Treasurer

Telephone number 347 - 335 - 5761

Full Name of Designated Agent

Amar, Sivan, Estee, ,

Mailing Address

18 Mechanic St

Apt 1

New Haven

CT

06511

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

347

335

5761

9. 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.

Webster Financial Corporation

Mailing Address

185 Asylum St.

5th Floor HFD 610

Hartford

CT

06103

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundraising Participant:

1.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
2.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
3.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

Relationship: CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Legnani, Andrew, Joseph, ,
Full Name

32 Overhill Dr.
Mailing Address

Berlin CT 06037
 CITY ▲ STATE ▲ ZIP CODE ▲

TITLE OR POSITION ▼ Candidate Telephone Number 860 - 559 - 7256

9. 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.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲