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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) ROCHESTER HIGHER EDUCATION AND RESEARCH PAC (RHER PAC) 121 State Street ADDRESS (number and street) (Check if address is changed) Albany 12207 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address sellis@hinmanstraub.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 30 2023 C00405340 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. Type or Print Name of Treasurer Doolan, Sean, M, Date 10 30 2023 Signature of Treasurer Doolan, Sean, M., 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

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

| E | EC Form 1 (Revised 03/2022) | Page 2 | | | | |
|----------------------|---|--------------------|--|--|--|--|
| | 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 conformation below.) | andidate | | | | |
| | Name of Candidate ''','','','',' | | | | | |
| | Candidate Party Affiliation Office Sought: House Senate President | State | | | | |
| | (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. | District | | | | |
| | Name of Candidate | | | | | |
| | Party Committee: | | | | | |
| | (d) This committee is a (National, State or subordinate) committee of the Republican, et | c.) Party | | | | |
| | Political Action Committee (PAC): | | | | | |
| | (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization or line 6. | organization is a: | | | | |
| | Corporation Corporation w/o Capital Stock Labor Orga | anization | | | | |
| | Membership Organization Trade Association Cooperative | е | | | | |
| | In addition, this committee is a Lobbyist/Registrant PAC. | | | | | |
| | (f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated f committee. (i.e., nonconnected committee) | und or party | | | | |
| | In addition, this committee is a Lobbyist/Registrant PAC. | | | | | |
| | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | | | | | |
| | (g) This committee is an independent expenditure-only political committee (Super PAC). | | | | | |
| | In addition, this committee is a Lobbyist/Registrant PAC. | | | | | |
| | (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC) | | | | | |
| | In addition, this committee is a Lobbyist/Registrant PAC. | | | | | |
| | Joint Fundraising Representative: | | | | | |
| | (i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or n committees/organizations, at least one of which is an authorized committee of a federal candidate. | nore political | | | | |
| | (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or no committees/organizations, none of which is an authorized committee of a federal candidate. | nore political | | | | |
| | Committees Participating in Joint Fundraiser | | | | | |
| | 1 | | | | | |

Title or Position ▼

Treasurer

| | _ | | | _ | | |
|----|--|--|--|----------------------|--|--|
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| ٧ | Vrite or Type Committee Name | | | | | |
| | ROCHESTER H | IGHER EDUCATION AN | ND RESEARCH PAC (F | RHER PAC) | | |
| 6. | Name of Any Connected O | rganization, Affiliated Committee, Joint | Fundraising Representative, or Lead | ership PAC Sponsor | | |
| | NONE | | | | | |
| | | | | | | |
| | Mailing Address | | | | | |
| | | | | | | |
| | | | | | | |
| | | CITY ▲ | STATE ▲ | ZIP CODE ▲ | | |
| | Relationship: Connected | Organization Affiliated Organization | Joint Fundraising Representative | Leadership PAC Spons | | |
| 7. | books and records. | ify by name, address (phone number opt | ional) and position of the person in posse | ession of committee | | |
| | Doolan, Se | an, M, , | | | | |
| | Mailing Address | 121 State Street | | | | |
| | | | | | | |
| | | Albany | NY 1220 | 7 | | |
| | | CITY ▲ | STATE ▲ | ZIP CODE ▲ | | |
| | Title or Position ▼ | | | | | |
| | Treasurer | | Telephone number 518 | 436 - 0751 | | |
| 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 Doolan, Se | ean, M, , | | | | |
| | Mailing Address | 121 State Street | | | | |
| | - | | | | | |
| | | Albany | NY 1220 | 77 | | |
| | | CITY ▲ | STATE ▲ | ZIP CODE ▲ | | |

518

Telephone number

436

0751

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|-------------------------------------|---|---|---|
| Full Name of Designated Agent | Stubbe, Todd, L, , | | |
| Mailing Address | 1300 Clinton Square | | |
| | | | |
| | Rochester | NY 14604 | |
| Title or Position | CITY ▲ | STATE ▲ ZIP CODE ▲ | |
| Assistant Treasu | rer | one number 585 - 263 - 1186 | |
| | Depositories: List all banks or other depositories in which the cases or maintains funds. | committee deposits funds, holds accounts, rents | |
| Name of Bank, D | depository, etc. | | |
| | TD Bank | | |
| Mailing Address | 125 State Street | | |
| | | | |
| | Albany | NY 12207 | |
| | CITY ▲ | STATE ▲ ZIP CODE ▲ | |
| Name of Bank, D | epository, etc. | | _ |
| | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| | CITY ▲ | STATE ▲ ZIP CODE ▲ | |