

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Committee To Elect David J. Moraschini President

ADDRESS (number and street) 260 PEQUOT AVE

(Check if address is changed)

NEW LONDON CT 06320-4619
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

DAVID.MORASCHINI@YAHOO.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 10/12/2015

3. FEC IDENTIFICATION NUMBER C 00304014

4. IS THIS STATEMENT NEW (N) OR (A) 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 NORMAN NADEAU

Signature of Treasurer Norman A. Nadeau Date 10/08/2015

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)

2016-01-06 10:00:00 AM

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 DAVID J. MARASCINI

Candidate Party Affiliation Democratic Office Sought: House Senate President State: _____ District: _____

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

Name of Candidate DAVID J. MARASCINI

Party Committee:

(d) This committee is a NATIONAL (National, State or subordinate) committee of the Democratic (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. C1019304014 FEC ID number C
- 2. _____ FEC ID number C
- 3. _____ FEC ID number C
- 4. _____ FEC ID number C

NON-PROFIT ORGANIZATION

Full Name of Designated Agent

NORMAN MADEAU

Mailing Address

107 BLAIR RD

Wilmington
CITY

CT
STATE

06279
ZIP CODE

Title or Position

TREASURER

Telephone number

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.

PENDING

Mailing Address

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

2010-01-09 09:00:00 AM

DM

MASPOSCINI

260 PRINCE ST AVE

NEW LONDON CT 06320

1311 LONDON CT 06320



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FEDERAL RESERVATION COMM

999 E STREET NW

WASHINGTON DC 20463

WASHINGTON DC 20463

NOTICE OF DELIVERY PROBLEMS

2015 DEC 28 15

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER
(3/2015)

[Signature]

1/6/16
DATE PREPARED

20150303 10:00:00 AM