

Nicholas Wilt
93 Fonthill Park
Rochester, NY 14618

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2026 JAN -9 AM 11:27

8 January 2025

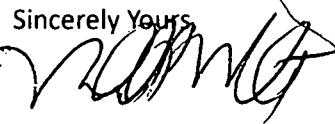
FEC
1050 First Street NE
Washington, DC 20463

RE: C00674788

To Whom It May Concern:

I have enclosed Forms 1 and 2 for a candidacy for the House of Representatives, NY-25. An existing candidate number C-00674788 for this candidate may be found, but the address and name of the principal committee need to be updated as per the enclosed.

Please don't hesitate to call my cell 585-309-2637 with any questions or guidance on correct filing.

Sincerely Yours,


Nicholas Wilt

Enclosure(s)

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

CO0674788

Robin For Us

ADDRESS (number and street)

93 Fonthill Park

(Check if address
is changed)

Rochester

CITY ▲

NY

14618

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

treasurer@robinforus.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

<http://www.robinforus.com>

<http://www.robin4us.com>

2. DATE 12 26 2025

3. FEC IDENTIFICATION NUMBER ►

C

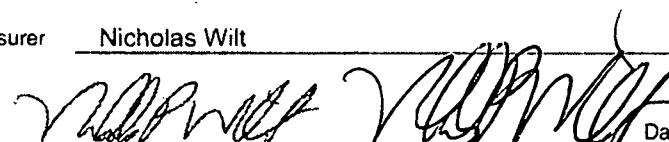
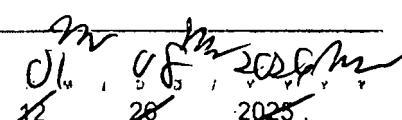
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

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

Nicholas Wilt

Signature of Treasurer


Date 
01/08/2025

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.

Office
Use
Only

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

FEC FORM 1
(Revised 03/2022)

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 Robin Wilt

Candidate	DEM	Office Sought:	<input checked="" type="checkbox"/> House	Senate	President	State	NY
Party Affiliation						District	25

(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.)

(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 more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(j) 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.

C

2.

C

Full Name of
Designated
Agent

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

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.

M&T Bank

Mailing Address

1882 East Avenue
Rochester
NY
14610

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

5(i) or (j). Joint Fundraising Participant:

1. [REDACTED]	FEC ID number	C
2. [REDACTED]	FEC ID number	C
3. [REDACTED]	FEC ID number	C
4. [REDACTED]	FEC ID number	C

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

[REDACTED]
[REDACTED]

Mailing Address

[REDACTED]
[REDACTED]
[REDACTED]

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)

Full Name [REDACTED]

Mailing Address [REDACTED]
[REDACTED]
[REDACTED]

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

[REDACTED] Telephone Number [REDACTED]-[REDACTED]-[REDACTED]

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. [REDACTED]Mailing Address [REDACTED]
[REDACTED]
[REDACTED]

CITY ▲

STATE ▲

ZIP CODE ▲

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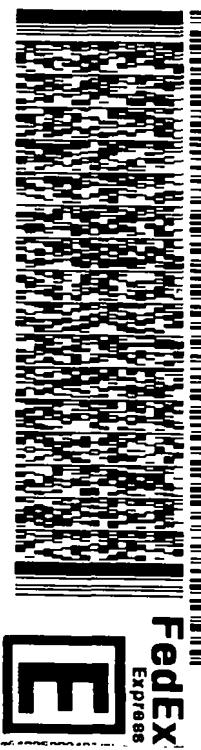
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ORIGIN ID:DNHA (585) 309-2637
SHIP DATE: 08JAN08
NICHOLAS WILT ACTWT: 0.15 LB
93 FORTNELL PARK CAD: 6570380/R082637
ROCHESTER, NY 14618 UNITED STATES US

TO
FEC
1050 FIRST STREET NORTHEAST

WASHINGTON DC 20463
(0000) 000-0000 REF:
SPN: DEPTL



FRIDAY - 09 JAN 10:30A
TAKK# 8877 4541 8424
SHIP DATE: 08JAN08
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20463 DC-US IAD



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1050 FIRST ST NE 20463
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724-4537
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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.

<input type="checkbox"/>	Hand Delivered	Date of Receipt
<input type="checkbox"/>	USPS First Class Mail	Date of Receipt
<input type="checkbox"/>	USPS Registered/Certified	Postmarked (R/C)
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<input type="checkbox"/>	USPS Priority Mail Express	Postmarked
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	No Postmark	
<input checked="" type="checkbox"/>	Overnight Delivery Service (Specify): <i>FedEx</i>	Shipping Date 1/8/26 Date of Receipt 1/9/26 Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/>	Received via FAX	Date of Receipt
<input type="checkbox"/>	Received via Email	Date of Receipt
<input type="checkbox"/>	Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/>	Other (Specify):	Date of Receipt or Postmarked
<i>SPW</i>		1/12/26
PREPARER (4/2023)		DATE PREPARED