## 12030770904

FEC FORM

## STATEMENT OF ORGANIZATION

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FORM 1		UNGANI		<b>714</b>		
FUNIVI I						FOEGMAIL CENTER
1. NAME OF COMMITTEE (in	ı full)	(Check if name is changed)		nple:If typing, type the lines.	12FE4M	one militaria de la companya del companya de la companya del companya de la compa
Christophe	rR. W	ight for Cong	ress			
	<u> </u>	<u> </u>	<u> </u>			1 1 1 1 1 1 1 1
ADDRESS (number a	nd street)	122 East 83	rd Str	eet <u> </u>	1111	
(Check if ac is changed)		New York			NY	10028 _ 0838
			CITY	1	STATE	ZIP CODE
COMMITTEE'S E-MA	IL ADDRES	S (Please provide only one	e e-mail ad	dress)		
(Obs. al. 2		info@cw201	2,cor	<b>n</b> , , , , , , ,		
(Check if is change						
COMMITTEE'S WEB	PAGE ADD	PRESS (URL)				
		www.cw201	2.com	<b>)</b> , , , , , , , , ,		
(Check if is changed				1		
2. DATE 03	26	2012.		·		
3. FEC IDENTIFIC	CATION NU	<b>1</b> 0		et inge bestigne saugneren generen. En inge bestigne saugneren generen.		
4. IS THIS STATE	MENT 🗵	NEW (N) OR		AMENDED (A)		
I certify that I have e	xamined thi	s Statement and to the be	est of my k	nowledge and belief it	is true, correc	et and complete.
Type or Print Name	of Treasurer	Christopher	R. W	ight		
Signature of Treasure	er(	Mustaphen 18	2 Wy	ht	Date Ö2	I (09° 2012
NOTE: Submission of		ous, or incomplete information				o the penalties of 2 U.S.C. §437g.
Office Use Only				For further information co Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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	Г	EC FO	m 1 (Revised 02/2009)	Page 2
 5.	TYPE	OF C	OMMITTEE	
	Cend	didate	Committee:	
	(a)	$\times$	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. (Compinformation below.)	lete the candidate
	Name Candi		Christopher R. Wight	\$-care25cenes
	Candid Party	date Affiliati	on Rep Sought: House Senate President	State NY District 12
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candid	-		
	Party	y Con	nmittee:	
	(d)			Democratic, Republican, etc.) Party.
	Politi	ical A	ction Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	nected organization is a
			Corporation Wo Capital Stock	Labor Organization
			Membership Organization Trade Association	Cooperative
			In addition, this committee is a Lobbyist/Registrant PAC.	oooporuvo
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate seg	aregated fund or party
	(1)	Ц	committee (i.e., nonconnected committee)	gregated fullo of party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint	Func	raising Representative:	dishidda 1980 aan maan madalan caa a a a a a a a a a a a a a a a a a
(	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 eandidate.	o or more political
(	h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two	o or more political
		Ш	committees/organizations, none of which is an authorized committee of a federal candidate.	
		Com	mittees Participating in Joint Fundraiser	
		1.	FEC ID number C	and the second second second second
		2.		començation of the contract of
		3.		
		4.		

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light for Congress			
	int Fundraising Represen	tative, or Leadership PAC	Sponsor
111111111111111111111111111111111111111			
CITY	ST	ATE ZIP COD	DE
Organization Affiliated Committee	Joint Fundraising Repr	esentative Leadership F	PAC Sponsor
ify by name, address (phone number	optional) and position of	the person in possession of	of committee
		<u> </u>	
CITY	STA	TE ZIP COD	E
	Telephone number	<u> </u>	
address (phone number optional) ossistant treasurer).	of the treasurer of the com	mittee; and the name and a	address of
ppher R. Wight	1 1 1 1 1 1 1		
122 East 83rd Street	1 1 1 1 1 1		لـــــا
Navy Xada		V 10000	2002
			0838
	Telephone number	917, - 828, -	
	CITY  Organization Affiliated Committee  ify by name, address (phone number  CITY  CITY  address (phone number optional) of ssistant treasurer).  Opher R. Wight  122 East 83rd Street  New York  CITY	rganization, Affiliated Committee, Joint Fundraising Representation  CITY STA  Organization Affiliated Committee Joint Fundraising Representity by name, address (phone number optional) and position of CITY STA  CITY STA  Telephone number address (phone number optional) of the treasurer of the comsistent treasurer).  Opher R. Wight  122 East 83rd Street	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC  CITY STATE ZIP COD  Organization Affiliated Committee Joint Fundraising Representative Leadership f  ify by name, address (phone number optional) and position of the person in possession of  CITY STATE ZIP COD  CITY STATE ZIP COD  Telephone number   -   -   -    address (phone number optional) of the treasurer of the committee; and the name and a sistent treasurer).  Opher R. Wight  122 East 83rd Street

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Full Name of Designated		
Agent		
Mailing Address		
		1 1-1 1 1 1
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit b	er Depositories: List all banks or other depositories in which the committee deposits funds, ho boxes or maintains funds.  Depository, etc.	lds accounts, rents
safety deposit b	Depository, etc.  Chase Manhattan Bank	Ids accounts, rents
safety deposit b Name of Bank,	Depository, etc.  Chase Manhattan Bank	Ids accounts, rents
safety deposit b Name of Bank,	Depository, etc.  Chase Manhattan Bank	
safety deposit b Name of Bank,	Depository, etc.  Chase Manhattan Bank  1, Chase Manhattan Plaza	
safety deposit b Name of Bank, Mailing Address	Depository, etc.  [Chase Manhattan Bank]  [1,Chase Manhattan Plaza]  [New York]  [New York]  [New York]	
safety deposit b Name of Bank, Mailing Address	Depository, etc.  [Chase Manhattan Bank]  [1,Chase Manhattan Plaza]  [New York]  [New York]	
safety deposit b Name of Bank, Mailing Address	Depository, etc.  [Chase Manhattan Bank]  [New York]  CITY  STATE  Depository, etc.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc.  [Chase Manhattan Bank]  [New York]  CITY  STATE  Depository, etc.	D5, J-L, J-L
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc.    Chase Manhattan Bank	D5, j-L, J-L

(3/2005)

## **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. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Fed Gx Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED PREPARER