Image# 27940128939

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instruction						Offi	ce use onl	v		
1. NAME OF COMMITTEE (in	full) X	(Check if name is changed)	Exampl over the	e: If typying, typ lines	ре	12FE	4M5	1 1				
RAJ FOR CON	GRESS, INC.				1 1	1 1	<u> </u>	1 1		<u> </u>		
	11111	11111	<u> </u>	<u> </u>	1.1	1 1	1 1	1 1	1 1 1			
ADDRESS (number and	street) PO B	OX 181				1 1						
(Check if address is changed)		T WASHINGTON				L PA	 J		1903	4 _ [<u> </u>	
COMMITTEE'S E-MAI	I ADDRESS		CITY▲			STATE	•		ZIF	CODE	≣ ▲	
	@comcast.net								1 1 1		1 1	, 1
1												
COMMITTEE'S WEB	PAGE ADDRESS (II	 					<u> </u>					
www.rajforco		· · · · ·										ı
	<u> </u>											
2. DATE 0.9												
3. FEC IDENTIFICA	TION NUMBER		C C0041	6784								
4. IS THIS STATEM	ENT NEW	(N) OR	X	AMENDED	(A)							
I certify that I have exami		to the best of my know	wledge and b	elief it is true, co	orrect and	comple	ete					_
Signature of Treasurer	Electronically File	d by ALEX BAR	RNA		[Date	0	1 /	3 1	/ Y	ý 2 0	0 7
NOTE: Submission of fal		nplete information may							of 2 U.S.0). S437	'g.	
Office Use Only			Fe To	r further inforn deral Election C Il Free 800-424- cal 202-694-110	ommissio				FEC (Revise	FOR ed 02/20		

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5.	TYPE OF COMMITTEE (Check One)						
	(a) X 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 RAJ PETER BHAKTA Candidate						
	Candidate Party Affiliation REP Office Sought: X House Senate President	State PA District 13					
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate						
		mocratic, ublican,etc.) Party.					
	(e) This committee is a separate segregated fund						
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fun committee.	d or party					
ô.	Name of Any Connected Organization or Affiliated Committee						
L							
L							
	Mailing Address						
	CITY ≜ STATE ♠ Z	IP CODE A					
	Relationship						
	Type of Connected Organization:						
	Corporation Corporation w/o Capital Stock Labor Organization	n					
	Membership Organization Trade Association Cooperative						

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Write or Type Committee Name			
RAJ FOR CONGRESS, INC.			
 Custodian of Records: Identify possession of Committee book 	by name, address, (phone numes and records.	ber optional), and position o	f the person in
Full Name ALEX BARN	VA		
Mailing Address	270 S WOODMONT DI		
	DOWNINGTOWN		19335
Title or Position ▼	CITY 🛦	STATE	ZIP CODE A
TREASURER		Telephone number	873 8215
of Treasurer ALEX BARN Mailing Address	270 S WOODMONT DI	RIVE	
	DOWNINGTOWN		19335
Title or Position ▼	CITY A	STATE ▲	ZIP CODE ▲
TREASURER		Telephone number 610	
Full Name of Designated Agent			
Mailing Address			
Title or Position ♥	CITY A	STATE A	
		Telephone number	

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds account safety deposit boxes or maintains funds. Name of Bank, Depository, etc.					
	Abir Mailing Address	ngton Bank 101 Fort Washington Ave				
		Fort Washington PA 190	034 _			
		CITY △ STATE 🗸 ZI	P CODE 🛆			