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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) is changed) over the lines. Mary Jo Daley for Congress 1294 Montgomery Ave. ADDRESS (number and street) (Check if address is changed) Narberth 19072 PΑ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS maryjo@maryjodaley.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2018 C00670570 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. Adenbaum, Sam, , , Type or Print Name of Treasurer Adenbaum, Sam,,, [Electronically Filed] 02 20 2018 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

		1 (Paying 00/0000)	Daga 2
		OMMITTEE	Page 2
		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. (Con information below.)	nplete the candidate
Nam Cand	e of lidate	Daley, Mary, Jo, ,	
	lidate ⁄ Affiliatio	on DEM Office Sought: X House Senate President	State PA District 04
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of lidate		
Par	ty Con	nmittee:	(Dama ayatia
(d)		(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name		
Mary Jo Daley f	or Congress	
6. Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadersl	nip PAC Sponsor
NONE		
	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponso
books and records.	tify by name, address (phone number optional) and position of the person in pos	session of committee
Adenbaum Full Name	, Sam, , , 	
Mailing Address	127 Penarth Rd.	
	Bala Cynwyd PA 19004	
Title or Position	CITY STATE	ZIP CODE
Treasurer		585 - 1830
3. Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the nar ssistant treasurer).	ne and address of
Full Name Adenbaum of Treasurer	, Sam, , ,	
Mailing Address	127 Penarth Rd.	
	Bala Cynwyd PA 19004	
Title or Position		ZIP CODE
Treasurer	Telephone number 610 - 5	585 1830

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
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