

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

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

12FE4M5

Lonnie For Congress

ADDRESS (number and street)

120 N Valleybrook Road

☐(Check if address  
is changed)

Cherry Hill

CITY ▲

NJ

STATE ▲

08034

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐(Check if address  
is changed)

lonnieforjersey@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address  
is changed)

lonnieforjersey.com

2. DATE

MM / DD / YYYY  
01 / 12 / 2026

3. FEC IDENTIFICATION NUMBER ►

C

C00934208

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 Affrime, Scott, , ,

Signature of Treasurer Affrime, Scott, , ,

Date

MM / DD / YYYY  
01 / 12 / 2026

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  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

C

Write or Type Committee Name

Lonnie For Congress

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

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☐ Connected Organization ☐ Affiliated Organization ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Affrime, Scott, , ,

Mailing Address 5 Longwood Drive

Burlington

NJ

08016

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

856

669

8497

## 8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Affrime, Scott, , ,

Mailing Address 5 Longwood Drive

Burlington

NJ

08016

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

856

669

8497

Full Name of  
Designated  
Agent

Affrime, Lonnie, , ,

Mailing Address

120 N Valleybrook Road

Cherry Hill

NJ

08034

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.

PNC

Mailing Address

315 N Haddon Ave.

Haddonfield

NJ

08033

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲