Image# 15950020956				01/12/2015 15 : 50
				PAGE 1 / 4
	STATEMENT	OF		
FEC	ORGANIZAT	ION		
FORM 1				
			Office	e Use Only
1. NAME OF COMMITTEE (in full)		xample:If typing, type ver the lines.	12FE4M5	
Committee to Pe	Elect Nydia M. Vol	azaliaz ta Can	arocc	
	Elect Nydia M. Vel			
1				
	315 Inspiration Lane			
ADDRESS (number and street)				
(Check if address is changed)				
is changed)	Gaithersburg	I	MD 20878	
			-	
COMMITTEE'S E-MAIL ADDRES				
(Check if address is changed)	vwinpisinger@gmail.com			
is changed)	Optional Second E-Mail Address			
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
 (Check if address is changed) 				
	1			I
2. DATE 01 12				
3. FEC IDENTIFICATION NU	MBER C C00271	312		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
	()			
I certify that I have examined th	is Statement and to the best of my	y knowledge and belief it is	s true, correct and co	omplete.
	Dalla Diana Arra			
Type or Print Name of Treasurer	Betty Diana Arce			
Ratta	Diana Arce		M M /	D D / Y Y Y Y
Signature of Treasurer		[Electronically Filed]	Date 01	12 2015
NOTE: Submission of false errore	ous, or incomplete information may s	subject the person signing thi	s Statement to the ne	nalties of 2 U.S.C 8437g
	ANY CHANGE IN INFORMATION S			
Office		For further information cor		EC FORM 1
Use Only		Federal Election Commission Toll Free 800-424-9530		Revised 06/2012)

	F	EC For	rm 1 (Revised 02/2009)	Page 2	
j	TYPE	OF C	OMMITTEE		
	Cano	didate	Committee:		
	(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. (Complein information below.)	ete the candid	ate
	Name Candi		Nydia M. Velazquez		_ _
	Candi		DEM Office Sought Mouro Sonato Prosident	State	NY
	Party	Affiliatio	on Sought: X House Senate President	District	07
	(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name Candie				
	Party	y Com	imittee:		
	(d)			emocratic, epublican, etc.)) Party.
	Politi	ical A	ction Committee (PAC):		
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	ected organizat	ion is a:
			Corporation Corporation w/o Capital Stock	Labor Organiz	ation
			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 segr committee. (i.e., nonconnected committee)	egated fund o	r party
			In addition, this committee is a Lobbyist/Registrant PAC.		
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
ļ	Joint	Fund	raising Representative:		
(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 candidate.	or more politic	al
(1	h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more politica	al
		Com	nittees Participating in Joint Fundraiser		
		1.			
		2.	FEC ID number		
		3.	FEC ID number		
		4.	FEC ID number		

I

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Committee to Re-Elect Nydia M. Velazquez to Congress

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

	Mailing Address				
		С	ITY	STATE	ZIP CODE
	Relationship: Connected	Organization	I Committee	t Fundraising Represer	tative Leadership PAC Sponsor
7.	Custodian of Records: Ider books and records.	tify by name, address (pho	one number optiona	al) and position of the	person in possession of committee
	Vickie L W	inpisinger			
	Mailing Address	315 Inspiration Lane			
		Gaithersburg			20878
	Title or Position	C	ITY	STATE	ZIP CODE
	Assistant Treasurer		L Te	lephone number	301 947 0278

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	Betty Diana Arce			
Mailing Address	315 Inspiration Lane			
	· O aith a rah · · · · ·		20878	
	Gaithersburg	MD	20070	
	CITY	STATE	20878	

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Full Name of Designated Agent																											
Mailing Address																											
																			L								
						CI	TΥ									ST/	λΤΕ				ZI	ΡC		θE			
Title or Position																											
											Tele	eph	ione	e ni	umt	ber											

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.

Ba	ank of America, N.A.		
Mailing Address	PO Box 25118		
	⊺Tampa _	FL	33622
	CITY	STATE	ZIP CODE
Name of Bank, Depo	sitory, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE