Only

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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) over the lines. is changed) Autiello Committee 13 Pallas Street ADDRESS (number and street) (Check if address is changed) Providence 02903 RΙ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS info@nickautiello.com (Check if address is changed) Optional Second E-Mail Address contact@beecompliance.co COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 07 2023 C00835926 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. Rietveld, Eric, , , Type or Print Name of Treasurer Rietveld, Eric, , , [Electronically Filed] 06 07 2023 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	TYPE OF COMMITTEE:					
	Candidate 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. (Complete the calinformation below.)					
	Name of Candidate Autiello, Nicholas, , , II					
	Candidate Party Affiliation DEM Office Sought: House Senate President	State RI District 01				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
	Party Committee:					
	(d) This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party				
Political Action Committee (PAC):						
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	ganization is a:				
	Corporation Corporation w/o Capital Stock Labor Organ	ization				
	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 segregated fund or part committee. (i.e., nonconnected committee)					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	(g) This committee is an independent expenditure-only political committee (Super PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	Joint Fundraising Representative:					
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, none of which is an authorized committee of a federal candidate.						
	Committees Participating in Joint Fundraiser 1					

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	Autiello Commi		- Landaudia BAO Oranga
6.	NONE	ganization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization	
	netationship.	Organization Anniated Organization John Fundraising Representati	Leadership FAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the person i	in possession of committee
	Rietveld, Er	ic, , ,	
	Full Name	<u> </u>	
	Mailing Address	13 Pallas Street	
		1	
		Providence	02903
	Title or Desition —	CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	01 - 644 - 1452
8.	Treasurer: List the name and any designated agent (e.g., a	and the name and address of	
	Full Name Rietveld, Er	ic, , ,	
	of Treasurer		
	Mailing Address	13 Pallas Street	
		Providence RI	02903
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	01 - 644 - 1452

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	Full Name of Designated	(101000 021000)		. 490 .		
	Agent					
	Mailing Address					
	Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲		
		Telephone no	umber			
		Depositories: List all banks or other depositories in which the commi es or maintains funds.	ttee deposits f	unds, holds accounts, rents		
	Name of Bank, Depository, etc.					
		Citizens Bank				
	Mailing Address	30 Kennedy Plaza				
		Providence	RI L	02903		
		CITY ▲	STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.						
	Mailing Address					
		CITY ▲	STATE ▲	ZIP CODE ▲		