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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. National Democratic Training Committee PAC PO Box 65322 ADDRESS (number and street) (Check if address is changed) Washington 20035 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Brian@pcmsllc.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.traindemocrats.org/ (Check if address is changed) DATE 2021 C00603084 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. Foucart, Brian, , , Type or Print Name of Treasurer Foucart, Brian, , , [Electronically Filed] 09 26 2021 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

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	orm 1 (Revised 02/2009)  COMMITTEE	Page <b>2</b>		
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. (Compinformation below.)	plete the candidate		
Name of Candidate				
Candidate Party Affiliat	ion Office Sought: House Senate President	State District		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Cor		_		
(d)		Democratic, Republican, etc.) Party		
Political A	Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is		
	Corporation Corporation w/o Capital Stock	Labor Organization		
	Membership Organization Trade Association	Cooperative		
	In addition, this committee is a Lobbyist/Registrant PAC.			
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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.)			
Joint Fund	draising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political		
(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.	o or more political		
Com	nmittees Participating in Joint Fundraiser			
1.	FEC ID number			
2.	FEC ID number			
3.	FEC ID number			
4.				

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		ocratic Training Committee PAC	Landauskin BAO Consum
6.		ed Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
D	emocratic Strategy	y Institute	
L			
	Mailing Address	910 17th St NW	
		Ste 925	
		Washington DC	20006
		CITY STATE	ZIP CODE
	Relationship: Conne	ected Organization 🗶 Affiliated Committee 📗 Joint Fundraising Represen	tative Leadership PAC Sponsor
'.	Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the	person in possession of committee
	Full Name	rt, Brian, , ,	
		PO Box 65322	
	Mailing Address		
		Washington DC	,20035
	Title or Position	CITY STATE	ZIP CODE
	Treasurer	Telephone number	202   628   1581
3.	Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee g., assistant treasurer).	e; and the name and address of
		t, Brian, , ,	
	of Treasurer	IPO Box 65322	
	Mailing Address	[ <del>] - ] , ] - ] - </del>	
		Washington	20035
	Title or Position Treasurer	CITY STATE	ZIP CODE  202   628   1581
		Telephone number	

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit box Name of Bank, D	Depositories: List all banks or other depositories in which the committee deposits funds, hold are or maintains funds.  Depository, etc.  Amalgamated Bank	
safety deposit box Name of Bank, D	Amalgamated Bank  1825 K St NW	
safety deposit box Name of Bank, D	epository, etc.  Amalgamated Bank	
safety deposit box Name of Bank, D	Amalgamated Bank  1825 K St NW	ZIP CODE
safety deposit box Name of Bank, D	Amalgamated Bank  1825 K St NW  Washington  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address	Amalgamated Bank  1825 K St NW  Washington  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address	Amalgamated Bank  1825 K St NW  Washington  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address	Amalgamated Bank    1825 K St NW	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address  Name of Bank, D	washington  CITY  STATE  Choice Bank  4470 W 78th Street Circle	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address  Name of Bank, D	Amalgamated Bank    1825 K St NW	ZIP CODE