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FEC FORM 1	STATEMEN ORGANIZ	_		PAGE 1 / 4
			Office	Use Only
I. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	PO Box 65322			
(Check if address is changed)	Washington CITY ▲		DC 20035 STATE ▲	
COMMITTEE'S E-MAIL ADDRE	ESS			
C (Check if address is changed)	janica@pcmsllc.com	Iress		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
DATE 06 0		00708636		
I. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
Type or Print Name of Treasure		of my knowledge and belief it	is true, correct and cor	
Signature of Treasurer	acopoulos, Janica, , ,	[Electronically Filed]	Date 06	07 2019
NOTE: Submission of false, erron	eous, or incomplete information a ANY CHANGE IN INFORMATION			alties of 2 U.S.C. §437g.
Office Use		For further information c Federal Election Commissi Toll Free 800-424-9530		C FORM 1 evised 06/2012)

Local 202-694-1100

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FEC F	orm 1 (Revised 02/2009)	Page 2
TYPE OF	COMMITTEE	
Candidat	e 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. (Compl information below.)	ete the candidate
Name of Candidate		
Candidate Party Affilia	tion Office Sought: House Senate President	State
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	mmittee:	
(d)		emocratic, epublican, etc.) Part
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected 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) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising 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 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.	or more political
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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202

Telephone number

1580

Write or Type Committee Name

HoulaPAC

Treasurer

1

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

Houlahan, Chrissy, , ,					
Mailing Address	PO Box 222				
	Devon			PA 1933	;3
		CITY		STATE	ZIP CODE
Relationship: Connected	d Organization	ted Committee	Joint Fundraisir	ng Representative	Leadership PAC Sponsor
 Custodian of Records: Iden books and records. 	tify by name, address (phone number	optional) and pos	sition of the person in	possession of committee
Kyriacopou	ulos, Janica, , ,				
	PO Box 65322				
Mailing Address					
	Washington				35
Title or Position		CITY		STATE	ZIP CODE

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	Kyriacopoulos, Janica, , ,
Mailing Address	PO Box 65322
	Washington DC 20035 -
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent														1	1								1			
Mailing Address																										
			1																L			1				
							CI	ΓY								STA	ΤE				ZIF	р С	OD	θE		
Title or Position																										
											Tele	eph	one	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.

	Amalgamated Bank		
Mailing Address	1825 K St NW		
	Washington		
	CITY	STATE ZIP CODE	
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY	STATE ZIP CODE	