Only

STATEMENT OF

PAGE 1/5

FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Coalition for Progressive Leadership 1030 15th Street NW ADDRESS (number and street) S358 B1 (Check if address is changed) Washington 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS lora@bluewavepolitics.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00617258 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. Lora Haggard Type or Print Name of Treasurer Lora Haggard [Electronically Filed] 05 13 2016 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

Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
TYP	E OF C	OMMITTEE	1 ago 2
Car	ndidate	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. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate y Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	/Damaau-+!-
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		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 secommittee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	ne	-
Coalition for Pr	ogressive Leadership	
	Organization, Affiliated Committee, Joint Fundraising Representat	ive, or Leadership PAC Sponsor
NONE		
		<u> </u>
Mailing Address		
	CITY STATE	ZIP CODE
		211 0002
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponso
. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of th	ne person in possession of committee
Lora Hag	ıgard	
Mailing Address	1030 15th Street NW	
	S358 B1	
	Washingtion	20005
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
3. Treasurer : List the name a	nd address (phone number optional) of the treasurer of the commit	ttee; and the name and address of
any designated agent (e.g.,	assistant treasurer).	
Full Name Lora Hag of Treasurer	gard	
Mailing Address	1030 15th Street NW	
	S358 B1	
	Washingtion	20005
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	

FEC Form 1 (Rev	rised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STAT	TE ZIP CODE
Title or Position	Telephone number	
safety deposit boxes or r Name of Bank, Depositor		eposits funds, holds accounts, rents
safety deposit boxes or r Name of Bank, Depositor	naintains funds. ry, etc. C of America 3 DuPont Circle NW	eposits funds, holds accounts, rents
safety deposit boxes or r Name of Bank, Depositor	naintains funds. ry, etc. C of America 3 DuPont Circle NW	DC 20036 - -
safety deposit boxes or r Name of Bank, Depositor	maintains funds. ry, etc. C of America 3 DuPont Circle NW Washington CITY STAT	DC 20036 - -
safety deposit boxes or r Name of Bank, Depositor Bank Mailing Address	maintains funds. ry, etc. C of America 3 DuPont Circle NW Washington CITY STAT	DC 20036 - -
safety deposit boxes or r Name of Bank, Depositor Bank Mailing Address	maintains funds. ry, etc. C of America 3 DuPont Circle NW Washington CITY STAT	DC 20036 - -
safety deposit boxes or r Name of Bank, Depositor Mailing Address Name of Bank, Depositor	maintains funds. ry, etc. C of America 3 DuPont Circle NW Washington CITY STAT	DC 20036 - -
safety deposit boxes or r Name of Bank, Depositor Mailing Address Name of Bank, Depositor	maintains funds. ry, etc. C of America 3 DuPont Circle NW Washington CITY STAT	DC 20036 - -

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: