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) is changed) over the lines. Stop Republicans PO Box 618293 ADDRESS (number and street) (Check if address is changed) Chicago 60661 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address harry@turnoutpac.org is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00633404 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Type or Print Name of Treasurer Pascal, Harry,, Date 80 17 2023 Signature of Treasurer Pascal, Harry, , , 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

E	EC Form 1 (Revised 03/2022)	Page 2
	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 information below.)	candidate
	Name of Candidate ''','','','',',',',',',',',',',',',','	
	Candidate Office Party Affiliation Sought: House Senate President	State
	(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 or subordinate) committee of the Republican,	
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	Corporation Corporation w/o Capital Stock Labor On	ganization
	Membership Organization Trade Association Cooperate	tive
	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 committee. (i.e., nonconnected committee)	I 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.)	
	(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 PA	C).
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1. L	
	C	

Progressive Turnout Project Progressive Turnout Project	I	FEC Form 1 (Revised 0	2/2009)		Page 3
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Progressive Turnout Project PO Box 617614	٧	Vrite or Type Committee Name			-
Progressive Turnout Project Project		Stop Republican	S		
Mailing Address PO Box 617614	6.	Name of Any Connected O	ganization, Affiliated Committee, Joint Fundra	ising Representative, or Leade	ership PAC Sponsor
Chicago City ▲ State ▲ ZiP CoDe ▲ Relationship: Connected Organization ★ Affillated Organization		Progressive Turnout	Project		
Chicago City ▲ State ▲ ZiP CoDe ▲ Relationship: Connected Organization ★ Affillated Organization					
CiTY ▲ STATE ▲ ZiP CODE ▲ Relationship: Connected Organization ★ Affiliated Organization			PO Box 617614		
City ▲ State ▲ Zip Code ▲ Relationship: Connected Organization ★ Affiliated Organization Joint Fundraising Representative Leadership PAC Spons 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Pascal, Harry, Full Name Mailing Address PO Box 618293 City ▲ State ▲ Zip Code ▲ Title or Position ▼ 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). Po Box 618293 Mailing Address Po Box 618293 Mailing Address Po Box 618293 Mailing Address Po Box 618293 Title or Position ▼		Mailing Address			
City ▲ State ▲ Zip Code ▲ Relationship: Connected Organization ★ Affiliated Organization Joint Fundraising Representative Leadership PAC Spons 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Pascal, Harry, Full Name Mailing Address PO Box 618293 City ▲ State ▲ Zip Code ▲ Title or Position ▼ 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). Po Box 618293 Mailing Address Po Box 618293 Mailing Address Po Box 618293 Mailing Address Po Box 618293 Title or Position ▼					
Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Spons 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Full Name Pascal, Harry, Full Name Organization PO Box 618293 CITY STATE ZIP CODE Title or Position Telephone number Telephone number Telephone number Address of any designated agent (e.g., assistant treasurer). Full Name Of Treasurer Pascal, Harry, Othicago IL 60661 CITY STATE Telephone number Telephone numb			Chicago	IL60661	
7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Pascal, Harry, Full Name City ▲ State ▲ Zip Code ▲ Title or Position ▼ 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 Mailing Address PO Box 618293 Mailing Address PO Box 618293 Mailing Address PO Box 618293 Title or Position ▼ City ▲ State ▲ Zip Code ▲ Title or Position ▼			CITY ▲	STATE ▲	ZIP CODE ▲
books and records. Full Name Mailing Address PO Box 618293 Cliry ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ 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 Mailing Address PO Box 618293 Cliry ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ Cliry ▲ STATE ▲ ZIP CODE ▲		Relationship: Connected	Organization X Affiliated Organization Joint	Fundraising Representative	Leadership PAC Sponso
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Mailing Address City A State A Zip Code A Title or Position ▼ Treasurer Telephone number Telephone number Telephone number of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address PO Box 618293 Chicago City A State A Zip Code A Title or Position ▼ Title or Position ▼		Pascal, Ha	ry, , ,		
Chicago CiTY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ Treasurer Telephone number Telephone numbe		Full Name			
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ 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 Mailing Address PO Box 618293 Chicago Chicago Clity ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼		Mailing Address	PO Box 618293		
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ 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 Mailing Address PO Box 618293 Chicago Chicago Clity ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼			I		
Title or Position ▼ Treasurer Telephone number Telephone numbe			Chicago		I-I
Title or Position ▼ Treasurer Telephone number Telephone numbe			CITY A	CTATE A	ZIR CODE A
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 Pascal, Harry, , , of Treasurer Mailing Address PO Box 618293 Chicago Chicago Clty ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼		Title or Position ▼	CITT =	SIAIE	ZIF CODE A
any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address PO Box 618293 Chicago Chicago CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼		Treasurer	Tele	ephone number	
of Treasurer Mailing Address PO Box 618293 Chicago CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼	8.			surer of the committee; and the i	name and address of
Mailing Address PO Box 618293 Chicago ClTY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼		1 4004., 114	ry, , ,		
Chicago IL 60661 — STATE ▲ ZIP CODE ▲ Title or Position ▼			PO Box 618293		
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼		ivialling Address			
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼					
Title or Position ▼			Chicago	IL 60661	
		Title or Decition —	CITY A	STATE ▲	ZIP CODE ▲
Treasurer		Title or Position ▼			223 4393

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Full Name of Designated Agent			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position ▼			
		Telephone number	
. Banks or Other Deposit safety deposit boxes or m	ories: List all banks or other depositories in w naintains funds.	hich the committee deposits fund	s, holds accounts, rents
Name of Bank, Depositor	y, etc.		
CIBC	Bank USA		
Mailing Address	1000 Green Bay Rd		
	Winnetka	IL (60093
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Depositor	y, etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
Progressive Takeove	er 		
Mailing Address	PO Box 618154		
	Chicago		60661
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Ty by name, address (phone number – optional control of the	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent
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FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisir	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
Turnout PAC			
Mailing Address	PO Box 617614		
	Chicago	 	60661
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Address	PO BOX 5326				
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