PAGE 1/6 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) CA LUV PAC (California Leadership United for Victory PAC) 499 S. CAPITOL STREET, SW ADDRESS (number and street) SUITE 420 (Check if address is changed) WASHINGTON DC 20003 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS Compliance@ABConsultingDC.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00573709 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. Angerholzer, Lindsay, F.,, Type or Print Name of Treasurer Angerholzer, Lindsay, F.,, [Electronically Filed] 01 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:
Ī	Use			Federal Election Commission
	Only			Toll Free 800-424-9530 Local 202-694-1100
	,			LUCAI 202-094-1100

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TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Co	mplete the candidate information below.)
(b) This committee is an authorized committee, and is NO information below.)	T a principal campaign committee. (Complete the candidate
Name of Candidate	<u> </u>
Candidate Office Party Affiliation Sought: House	See Senate President District
(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) or	(Democratic, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify	connected organization on line 6.) Its connected organization is a
Corporation	ation w/o Capital Stock Labor Organization
Membership Organization Trade A	Association Cooperative
In addition, this committee is a Lobbyist/Regi	strant PAC.
(f) This committee supports/opposes more than one Feder committee. (i.e., nonconnected committee)	ral candidate, and is NOT a separate segregated fund or party
In addition, this committee is a Lobbyist/Regi	strant PAC.
In addition, this committee is a Leadership P	AC. (Identify sponsor on line 6.)
(g) This committee is an independent expenditure-only pol	itical committee (Super PAC).
In addition, this committee is a Lobbyist/Regi	strant PAC.
(h) This committee is a political committee with both contr	bution and non-contribution accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Regi	strant PAC.
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising committees/organizations, at least one of which is an a	expenses and disburses net proceeds for two or more political authorized committee of a federal candidate.
(j) This committee collects contributions, pays fundraising committees/organizations, none of which is an authorize	expenses and disburses net proceeds for two or more political ed committee of a federal candidate.
Committees Participating in Joint Fundraiser	
1. [C
. 1	C

Title or Position ▼

Treasurer

	EEC Form 1 /Da	wicod 02/2000\	Page 2		
	FEC Form 1 (Re		Page 3		
_	_	AC (California Leadership United for Victor	y PAC)		
6.	Name of Any Conne Aguilar, Pete, ,	cted Organization, Affiliated Committee, Joint Fundraising Representative, c	r Leadership PAC Sponsor		
	Mailing Address	PO Box 10954			
		San Bernardino CA	92423		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Cor	nnected Organization Affiliated Organization Joint Fundraising Representation	ve Leadership PAC Sponso		
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Ang	gerholzer, Lindsay, F., ,			
	Full Name				
	Mailing Address	499 S. Capitol Street, SW			
		Suite 420			
		Washington DC	20003		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	02 - 403 - 0606		
8.		ame and address (phone number optional) of the treasurer of the committee; a (e.g., assistant treasurer).	and the name and address of		
	Full Name Ang	gerholzer, Lindsay, F., ,			
	of Treasurer				
	Mailing Address	499 S. Capitol Street, SW			
		Suite 420			
		Washington DC	20003		
		CITY ▲ STATE ▲	ZIP CODE ▲		

403

0606

202

Telephone number

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Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone number	
Banks or Other Depositor safety deposit boxes or mai	ies: List all banks or other depositories in water ntains funds.	which the committee deposits fu	nds, holds accounts, rents
Name of Bank, Depository,	etc.		
Bank o	of America, NA		
Mailing Address	201 Pennsylvania Ave, SE		
	Washington	DC	20003
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

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

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5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	Aguilar House Ma	jority Fund		
	Mailing Address	499 S Capitol St SW		
	Mailing Address	Suite 420		
		Washington	ı DCı	20003
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
 8. 9. 	Full Name _ _ _ Mailing Address TITLE OR POSITION	CITY A Tes: List all banks or other depositories in which	STATE A	
	Full Name	CITY A CITY A ries: List all banks or other depositories in which intains funds.	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail. Name of Bank,	CITY A CITY A ries: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY A CITY A ries: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY A CITY A ries: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	

FEC Form 1S (Revised 02/2017)

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

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
		Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
Ag	uilar Leadership	Fund		
ı	Mailing Address	499 S Capitol St SW		
		Suit 420		
		Washington	DC	20003
I	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fu	undraising Representa	ative Leadership PAC Sponsor
	nated Agent: Identify	by name, address (phone number – optional)		
Fu		by name, address (phone number – optional)		
Fu	III Name	by name, address (phone number – optional)		
Fu	III Name	by name, address (phone number – optional)		
Fu Ma	ailing Address	CITY	STATE A	ZIP CODE A
Fu Ma	III Name	CITY A	STATE A	ZIP CODE A
Fu Ma	ailing Address ITLE OR POSITION or Other Depositoric deposit boxes or main	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	
Fu Ma T 9. Banks safety Name	ailing Address ITLE OR POSITION or Other Depositoric	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	
Fu Ma T 9. Banks safety Name	ailing Address ITLE OR POSITION or Other Depositoric deposit boxes or mair of Bank,	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	
Fu Ma T 9. Banks safety Name	ailing Address ITLE OR POSITION or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	
Fu Ma T 9. Banks safety Name	ailing Address ITLE OR POSITION or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	