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## STATEMENT OF ORGANIZATION

FORM 1			Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Make America	a First PAC		
	2 Civic Center Drive		
ADDRESS (number and str	eet)		
<ul> <li>(Check if addre is changed)</li> </ul>	ss  #4338 		
	San Rafael		CA 94913-5703
	CITY A	· · · · · · · · · · · · · · · · · · ·	STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL A	DDRESS		
(Check if addre	ss tom@politicalcommuni	icationsinc.com	
is changed)			
	Optional Second E-Mail Add		
COMMITTEE'S WEB PAG (Check if addre is changed)	· · · ·		
2. DATE 08	23 / Y Y Y Y 2022		
3. FEC IDENTIFICATIO	ON NUMBER ► C co	00765313	
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)	
I certify that I have exami	ned this Statement and to the best	of my knowledge and belief it	s true, correct and complete.
Type or Print Name of Tre	easurer Montgomery, Thomas, , ,		
Signature of Treasurer	Montgomery, Thomas, , ,	[Electronically Filed]	Date 08 / 23 / 2022
NOTE: Submission of false,		may subject the person signing the figure of the second second second second second second second second second	is Statement to the penalties of 52 U.S.C. §30109 VITHIN 10 DAYS.
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

FE	Form 1 (Revised 03/2022)	Page <b>2</b>
5.	YPE 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 ca information below.)	ndidate
	Name of Candidate	
	Candidate Party Affiliation Office Sought: House Senate President	State
	c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	<u> </u>
	Party Committee: d) This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.	) Party
	Political Action Committee (PAC):	
	e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected or	ganization is a:
	Corporation Corporation w/o Capital Stock Labor Organ	ization
	Membership Organization Trade Association Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fur committee. (i.e., nonconnected committee)	nd 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 PAC).	
	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 more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
 Committees Participating in Joint Fundraiser
 2.

-	FEC Form 1 (Revised 0	02/2009)											Pa	ge <b>3</b>		
W	Irite or Type Committee Name															_
	Make America	First PAC														
6.	Name of Any Connected O Cargile, Mike, , ,	rganization, Affiliated	Committee,	Joint	Fun	draisi	ng F	Repre	sentati	ve, o	r Lea	dership	PAC	Spor	isor	
	Mailing Address	2 Civic Center Drive														
		<b>#4338</b>														
		San Rafael							CA		949	903		·		
			CITY 🔺						STATE			ZI	P COI	DE 🔺		
	Relationship: Connected	Organization Affilia	ted Organizati	on	J	oint Fu	undra	aising	Repres	entativ	ve	<b>x</b> Lea	dershi	p PAC	Spor	nsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Montgomer	y, Thomas, , ,
Full Name	
Mailing Address	2 Civic Center Drive
	#4338
	San Rafael     CA     94913-5703
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Record Keeper	Telephone number     415     -     250     -     4036

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	Montgomery, Thomas, , ,
of Treasurer	
Mailing Address	2 Civic Center Drive
	#4338
	San Rafael       CA       94913-5703
	CITY A STATE A ZIP CODE A
Title or Position	,
Treasurer	Image: Telephone number     415     -     250     -     4036

FEC Form 1 (Revised 02	2/2	20(	09	)																						Paç	ge 4	4	
Full Name of Designated Agent										 		I						1											
Mailing Address																													
	L																												
																											- [		
								С	ΤY									S	ΤА	ΤE				Z	P	CO	DE		
Title or Position ▼																													
													Те	lep	hor	ne	nu	mb	er				- [				- [_		

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.

U.S. B	ank		
Mailing Address	305 San Anselmo Avenue		
	San Anselmo	CA 94960	
	CITY A	STATE A	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY A	STATE A	ZIP CODE ▲

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Form/Schedule: F1A Transaction ID :

Address change

Form/Schedule: Transaction ID: