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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 X COMMITTEE (in full) over the lines. is changed) Congressional Progressive Caucus PAC PO Box 75357 ADDRESS (number and street) (Check if address is changed) Washington 20013 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS admin@evanskatz.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2017 C00513176 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. Evans, Diane, , , Type or Print Name of Treasurer Evans, Diane, , , [Electronically Filed] 10 12 2015 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

Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

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		m 1 (Revised 02/2009)	Page 2				
		DE COMMITTEE  date 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. (Compinformation below.)	lete the candidate				
Name Cand	e of lidate						
	lidate Affiliatio	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand	e of lidate						
Part	ty Com	nmittee:	Domoovatio				
(d)		· · · ·	Democratic, Republican, etc.) Party				
Poli	tical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	nected 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)	gregated 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 Fund	raising 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.	o 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.	o or more political				
	Committees Participating in Joint Fundraiser						
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

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Write or Type Committee Name		
Congressional I	Progressive Caucus PAC	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	rship PAC Sponsor
NONE		
Mailing Address	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative L	eadership PAC Sponsor
books and records.	ntify by name, address (phone number optional) and position of the person in p	ossession of committee
Full Name  Mailing Address	PO Box 75357  Washington  DC 20013	
Title or Position	CITY STATE	ZIP CODE
Treasurer		548   0880
<ol> <li>Treasurer: List the name and any designated agent (e.g., a</li> </ol>	d address (phone number optional) of the treasurer of the committee; and the rassistant treasurer).	name and address of
Full Name of Treasurer  Mailing Address	PO Box 75357  Washington  DC   20013	
Title or Position Treasurer	CITY STATE  Telephone number 202 - L	ZIP CODE  548

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Full Name of Designated Agent		, , , , , , <b>,</b> ,
Mailing Address		
maining Addless		
	CITY STATE ZIF	P CODE
Title or Position		
	Telephone number	
Name of Bank, I	PNC  1799 Columbia Rd NW  Washington  DC   20009	
		P CODE
Name of Bank, I		
Mailing Address		
	CITY STATE ZIF	CODE