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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] 05 08 2017 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 Only Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE .	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		(National, State	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected 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)			areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt 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
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Comm	nittee Name	
Congress	ional Progressive Caucus PAC	
6. Name of Any Co	onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
NONE		
<u> </u>	<u> </u>	
Mailing Address		
	CITY STATE Z	ZID CODE
	CITY STATE Z	ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
 Custodian of Re- books and record 	ecords: Identify by name, address (phone number optional) and position of the person in possels.	session of committee
	Evans, Diane, , ,	
Full Name	,PO Box 75357	
Mailing Address		
	Washington , DC , 20013	
	Washington DC 20013	
Title or Position	CITY STATE Z	ZIP CODE
Treasurer		548 - 0880
. Treasurer: List the any designated ac	ne name and address (phone number optional) of the treasurer of the committee; and the nam gent (e.g., assistant treasurer).	ne and address of
Full Name of Treasurer	Evans, Diane, , ,	
Mailing Address	PO Box 75357	
	Washington DC 20013	
Title or Position	CITY STATE Z	IP CODE
Treasurer		48 0880

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds oxes or maintains funds. Depository, etc.	, holds accounts, rents
safety deposit bo	PNC 1799 Columbia Rd NW	, holds accounts, rents
safety deposit bo Name of Bank, [PNC 1799 Columbia Rd NW	
safety deposit bo Name of Bank, [Depository, etc. PNC 1799 Columbia Rd NW Washington CITY STATE	009
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. PNC 1799 Columbia Rd NW Washington CITY STATE Depository, etc.	009
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. PNC 1799 Columbia Rd NW Washington CITY STATE Depository, etc.	009
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. PNC 1799 Columbia Rd NW Washington CITY STATE Depository, etc.	009
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. PNC 1799 Columbia Rd NW Washington CITY STATE Depository, etc.	009
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. PNC 1799 Columbia Rd NW Washington CITY STATE Depository, etc.	009