## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Democratic State Committee (Delaware) PO Box 2065 ADDRESS (number and street) (Check if address is changed) Wilmington 19899 DE CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Darryl@CommonCentsConsulting.net (Check if address X is changed) Optional Second E-Mail Address Tara@CommonCentsConsulting.net COMMITTEE'S WEB PAGE ADDRESS (URL) www.deldems.org (Check if address is changed) DATE 2019 C00211763 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. Keeley, Helene, , , Type or Print Name of Treasurer Keeley, Helene, , , [Electronically Filed] 80 2019 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

ı	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	i age £
Can	ndidate	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. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of didate		
Par	ty Con	nmittee:	
(d)	×	This committee is a STA (National, State or subordinate) committee of the DEM	(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 cor	nnected organization is a
		Corporation W/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated 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 to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo 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 Committee Name	
Democratic State Committee (Delaware)	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
Dollars for Democrats	
430 S. Capitol Street, SE  Mailing Address	
Washington DC 20003  CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Lea	adership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in posbooks and records.	ssession of committee
Tattrie, Darryl, , ,  Full Name	
PO Box 2065  Mailing Address	
Willimington DE 19899	_
Title or Position CITY STATE	ZIP CODE
3. <b>Treasurer:</b> List the name and address (phone number optional) of the treasurer of the committee; and the na any designated agent (e.g., assistant treasurer).	me and address of
Full Name Keeley, Helene, , , of Treasurer	
Mailing Address PO Box 2065	
Wilmington DE 19899	
Title or Position	ZIP CODE
Treasurer   302	328 9036

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit boxes of Name of Bank, Deposi		
safety deposit boxes of Name of Bank, Deposi	or maintains funds. itory, etc. IC Bank	
safety deposit boxes of Name of Bank, Deposi	or maintains funds. itory, etc.	
safety deposit boxes of Name of Bank, Deposi	or maintains funds. itory, etc.  IC Bank  1704 Marsh Rd	
safety deposit boxes of Name of Bank, Deposi	or maintains funds. itory, etc. IC Bank	
safety deposit boxes of Name of Bank, Deposi	or maintains funds. itory, etc.  IC Bank  1704 Marsh Rd	D ZIP CODE
safety deposit boxes of Name of Bank, Deposi	r maintains funds. itory, etc.  IC Bank  1704 Marsh Rd  Wilmington  DE 19810  CITY  STATE	
Name of Bank, Deposi  Mailing Address  Name of Bank, Deposi	r maintains funds. itory, etc.  IC Bank  1704 Marsh Rd  Wilmington  CITY  STATE  itory, etc.  malgamated Bank	
Name of Bank, Deposition  Name of Bank, Deposition  Name of Bank, Deposition  Name of Bank, Deposition	r maintains funds. itory, etc.  IC Bank  1704 Marsh Rd  Wilmington  CITY  STATE  itory, etc.	
Name of Bank, Deposi  Mailing Address  Name of Bank, Deposi	r maintains funds. itory, etc.  IC Bank  1704 Marsh Rd  Wilmington  CITY  STATE  itory, etc.	
Name of Bank, Deposition  Name of Bank, Deposition  Name of Bank, Deposition  Name of Bank, Deposition	r maintains funds. itory, etc.  IC Bank  1704 Marsh Rd  Wilmington  CITY  STATE  itory, etc.	ZIP CODE

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

FEC Form 1S (Revised 02/2017)

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<b>رد)</b>	lou(b) Joint Funducion	v Doubleinent.		
o(g)	or(h). <b>Joint Fundraisin</b>	g Participant:	FEC ID number	C
	1.		FEC ID number	C
	2.			
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	=	Organization, Affiliated Committee, Joint Fundra		e, or Leadership PAC Sponsor
	Mailing Address	DE Victory Fund		
		430 S. Capitol, SE		
		Washington	DC	20003
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			lephone Number	
9.				
	safety deposit boxes or ma	ries: List all banks or other depositories in which tintains funds.	the committee deposit	ts funds, holds accounts, rents
	Name of Bank, Depository, etc.	intains funds.	the committee deposit	es funds, holds accounts, rents
	safety deposit boxes or ma	intains funds.  f America	the committee deposit	es funds, holds accounts, rents
	Name of Bank, Depository, etc.	intains funds.  f America		ts funds, holds accounts, rents
	Name of Bank, Depository, etc.	intains funds.  If America    730 15th Street, N.W.	the committee deposit	

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

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5(g) c	or(h). <b>Joint Fundraisi</b> n	α Participant:		
- (3) -	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4.			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
		sroots Victory Fund	3 1	,
	Mailing Address	430 South Capitol Street SE		
		Washington	, DC	20003
	Relationship:	CITY A	STATE A	ZIP CODE ▲
			Fundraising Representa	
	Connected	Anniated Committee	Turidialing Represente	Leadership 1 AC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		<u> </u>
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name			7ID 0005
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A  lephone Number	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE <b>A</b>
9.	Full Name      Mailing Address  TITLE OR POSITION	CITY   CITY   Te	lephone Number	
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail	CITY   CITY   Te  ries: List all banks or other depositories in which taintains funds.	lephone Number	
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail	CITY   CITY   Te	lephone Number	
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, Bank (	CITY   CITY   Te  ries: List all banks or other depositories in which taintains funds.	lephone Number	
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   CITY   Te  ries: List all banks or other depositories in which saintains funds.  of America	lephone Number	
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   CITY   Te  ries: List all banks or other depositories in which saintains funds.  of America	lephone Number	

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	С
_				
		Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	FIRST STATE VIC	CTORY FUND 2020		
		918 PENNSYLVANIA AVE SE		
	Mailing Address			
		WASHINGTON	DC DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	Leadership PAC Sponsor
	-1			
8. <b>De</b> s		by name, address (phone number - optional)		
8. <b>De</b> :	signated Agent: Identify  Full Name	by name, address (phone number – optional)		
8. <b>De</b> :		by name, address (phone number – optional)		
8. <b>De</b> s	Full Name	by name, address (phone number – optional)		
8. <b>De</b> s	Full Name	by name, address (phone number – optional)		
8. <b>De</b> :	Full Name	CITY	STATE A	ZIP CODE A
8. <b>De</b> :	Full Name	CITY A	STATE A	
9. <b>Ba</b>	Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main	CITY   Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>Ba</b> saf	Full Name Mailing Address  TITLE OR POSITION  nks or Other Depositor	CITY   Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>Ba</b> saf	Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main me of Bank,	CITY   Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>Ba</b> saf	Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main me of Bank, pository, etc.	CITY   Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>Ba</b> saf	Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main me of Bank, pository, etc.	CITY   Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦