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PAGE 1/5

STATEMENT OF **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 Properties Corporation-Federal 430 South Capitol Street, SE ADDRESS (number and street) (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS marshall@dnc.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00384479 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. **Andrew Tobias** Type or Print Name of Treasurer Andrew Tobias [Electronically Filed] 05 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 (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	EC Fo	rm 1 (Pavisad 02/2000)	Page 2
		om 1 (Revised 02/2009) OMMITTEE	Page 2
		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.)	nplete the candidate
Name Cand			
Cand Party	lidate Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Con	nmittee:	
(d)	X	This committee is a NAT (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 con-	nnected organization is a
		Corporation Wo 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 so committee. (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.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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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FEC Form 1 (Revis			Page 3
Write or Type Committee N	_		
-	roperties Corporation-Fe		
6. Name of Any Connected	ed Organization, Affiliated Committee, Joint F	undraising Representative, or l	Leadership PAC Sponsor
DNC Services Corp	oration		
Mailing Address	430 S Capitol Street SE		
•			
	Washington	DC 2	20003
	CITY	STATE	ZIP CODE
Relationship: Conne	ected Organization X Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
7. Custodian of Records: books and records.	Identify by name, address (phone number op	tional) and position of the perso	n in possession of committee
Bradle Full Name	y K. Marshall		
Mailing Address	430 S Capitol Street SE		
J			
	Washington	DC	20003
Title or Position	CITY	STATE	ZIP CODE
Assistant Treasurer		Telephone number 202	8000
8. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the g., assistant treasurer).	treasurer of the committee; and	d the name and address of
Full Name Andrew of Treasurer	v Tobias		
Mailing Address	430 South Capitol Street		
	Washington	DC 2	20003
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number 202	- 863 - 8000

	n 1 (Revised 02/2009)						
Full Name of Designated Agent	Bradley K. Marshall						
Mailing Address	430 S Capitol Street SE						
	Washington DC 20003 CITY STATE	ZIP CODE					
Title or Position Assistant Treasu		863 - 8000					
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, I							
	Depository, etc.						
Name of Bank, [Depository, etc. Bank of America						
Name of Bank, [Depository, etc. Bank of America						
Name of Bank, [Depository, etc. Bank of America 730 15th Street NW	ZIP CODE					
Name of Bank, [Depository, etc. Bank of America 730 15th Street NW DC 20005	ZIP CODE					
Name of Bank, I	Depository, etc. Bank of America 730 15th Street NW DC 20005	ZIP CODE					
Name of Bank, I	Depository, etc. Bank of America 730 15th Street NW Washington DC 20005 CITY STATE Depository, etc.	ZIP CODE					
Name of Bank, [Depository, etc. Bank of America	ZIP CODE					
Name of Bank, [Depository, etc. Bank of America 730 15th Street NW Washington DC 20005 CITY STATE Depository, etc. Amalgamated Bank DC 20005 Company of the company of	ZIP CODE					

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor **Democratic Congressional Campaign Committee** 430 South Capitol Street SE Mailing Address 2nd Floor DC 20003 Washington **CITY** STATE 4 ZIP CODE Relationship: Joint Fundraising Representative Leadership PAC Sponsor Connected Organization Affiliated Committee [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number