FEC

09/21/2023 16 : 09

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STATEMENT OF ORGANIZATION

FORM 1		ORGANIZ		N								
								Office	e Use O	nly		
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)		ple:If typing, ty he lines.	ype	12F	E4M5	5				
Stop Republ	icans											
ADDRESS (number a	nd street)	PO Box 5326										
(Check if a is changed	address						1 1		1 1		1 1	
	1)	Evanston CITY ▲				STATE		60204				
COMMITTEE'S E-MA	AIL ADDRES	S										
(Check if a is changed	address 1)	harry@turnoutpac.org										
		Optional Second E-Mail Ad	dress									I
COMMITTEE'S WEB	address	RESS (URL)										
2. DATE	9 / D 21	2023										
3. FEC IDENTIFIC	CATION NU	MBER ► C C	00633404									
4. IS THIS STATEN		NEW (N) OR	×	AMENDED) (A)							
I certify that I have e	examined this	s Statement and to the best	t of my kn	owledge and b	pelief it is	s true,	correc	t and c	omplet	е.		
Type or Print Name	of Treasurer	Pascal, Harry, , ,										
Signature of Treasure	er Pasca	I, Harry, , ,			[Date	M 09	M /	21	/ Y	2023	Ý
NOTE: Submission of	false, erroned	ous, or incomplete information ANY CHANGE IN INFORMA							nalties	of 52 L	J.S.C. {	30109
Office Use Only			F	or further inform ederal Election C oll Free 800-424- ocal 202-694-110	Commissior 9530				-	ORN d 06/20 ⁻		

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5.	TYPE 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 candidate information below.)							
	Name of Candidate							
	Candidate Office Sought: House Senate President	State						
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.							
	Name of Candidate							
	Party Committee: (National, State or subordinate) committee of the (Democration of the or subordinate)	ic, n, etc.) Party						
	Political Action Committee (PAC):							
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:						
	Corporation Corporation w/o Capital Stock Labor C	Organization						
	Membership Organization Trade Association Cooper	ative						
	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 segregate committee. (i.e., nonconnected committee)	ed 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.)							
	(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 F	AC).						

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.

In addition, this committee is a Lobbyist/Registrant PAC.

Relationship:

Write or Type Committee Name

Stop Republicans

6.	Name of Any Connected O	rganization, Affiliated	Committee, J	loint Fundraising	Representative, or Lea	dership PAC Sponsor
	STOP THESE OPPRESSIVE	E PEOPLE: TYRANTS	RACISTS UNC	UALIFIEDS MISO	GYNISTS PROPAGANDI	ISTS (STOP TRUMP)
	Mailing Address	PO BOX 5326				
					IL 602	204
			CITY ▲		STATE A	ZIP CODE

Connected Organization X Affiliated Organization Joint Fundraising Representative Leadership PAC Sponsor

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

Pascal, Ha	rry, , ,			
Full Name				
Mailing Address	PO Box 5327			
	Evanston			60204
		CITY 🔺	STATE 🔺	ZIP CODE
Title or Position ▼				
Treasurer			Telephone number	331 - 223 - 4393

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	Pascal, Harry, , ,
of Treasurer	
Mailing Address	PO Box 5327
	Evanston IL 60204 IL IL IL IL
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Treasurer	Image: Telephone number 331 - 223 - 4393

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Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A	ZIP CODE
Title or Position ▼		
	Telephone number	·

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.

	CIBC Bank USA		
Mailing Address	1000 Green Bay Rd		
	Winnetka	IL 60093	
		STATE ▲	ZIP CODE
Name of Bank, [Depository, etc.		
Mailing Address			
		STATE A	ZIP CODE ▲

FEC Form 1S	(Revised	02/2017)
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g)	or (h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Progressive Turnout F	[•] roject		
	Mailing Address	PO Box 5327		
				60204
	Relationship:		STATE ▲	ZIP CODE A
	Connected	Organization X Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION		STATE A	ZIP CODE
		Tele	ephone Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds.	ne committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.			
	Mailing Address			

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

	ing Participant:				
1.			FEC	ID number	С
2.			FEC	ID number	С
3.			FEC	ID number	С
4.			FEC	ID number	С
Name of Any Connecte	d Organization, Affili	ated Committee, Joint	Fundraising R	epresentativ	ve, or Leadership PAC Spons
Progressive Takeov	er				
Mailing Address	PO Box 5308				
Mailing Address					
					60204
Relationshin:				OTATE A	
	ed Organization	CITY A	Joint Fundraisi	STATE ▲	
Connec Designated Agent: Iden Full Name	ed Organization	Affiliated Committee	-		
Connec	ed Organization	Affiliated Committee	_		
Connec Designated Agent: Iden Full Name	ed Organization	Affiliated Committee	_		
Connec Designated Agent: Iden Full Name	ed Organization	Affiliated Committee	_		
Connec Designated Agent: Iden Full Name	ed Organization	Affiliated Committee	_		
Connec Designated Agent: Iden Full Name	ed Organization	Affiliated Committee	_	ng Represent	tative Leadership PAC Spo

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

5(g)	or(h). Joint Fundraising	Participant:		
	1.		FEC ID numb	ber C
	2.		FEC ID numb	ber C
	3.		FEC ID numb	ber C
	4.			ber C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising Represent	ative, or Leadership PAC Sponsor
	Mailing Address	PO BOX 5327		
				60204
	Relationship:	CITY 🔺	STAT	
	Connected	Organization X Affiliated Committee	Joint Fundraising Repre	sentative Leadership PAC Sponsor
8.		by name, address (phone number – optiona	"	
	Mailing Address			
	TITLE OR POSITION		STATE	▲ ZIP CODE ▲
			Telephone Number	
9.	Banks or Other Depositor safety deposit boxes or mai Name of Bank,	ies: List all banks or other depositories in what ntains funds.	nich the committee de	posits funds, holds accounts, rents
	Depository, etc.			
	Mailing Address			
I I		CITY A	STATE	▲ ZIP CODE ▲