Only

STATEMENT OF

PAGE 1/5

FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Progressives Advancing United Leadership PAC 911 Central Avenue #362 ADDRESS (number and street) (Check if address is changed) Albany 12206 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address paultonkopac@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00508010 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. Type or Print Name of Treasurer Jordan, Sharon, , Date 04 22 2024 Signature of Treasurer Jordan, Sharon, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

FE	C Form 1 (Revised 03/2022)	Page 2			
	YPE OF COMMITTEE:				
	Candidate Committee:				
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)				
	didate				
	Name of Candidate				
	Party Affiliation Sought: House Senate President	State			
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	istrict			
	Name of Candidate				
	Party Committee:				
	(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.)	Party			
	Political Action Committee (PAC):				
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected org	anization is a			
	Corporation Corporation w/o Capital Stock Labor Organiz	zation			
	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 segregated fund committee. (i.e., nonconnected committee)	d 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 PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.				
	Joint Fundraising Representative:				
	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.				
	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					
	1C				

I	FEC Form 1 (Revised 0	2/2009)	Page 3		
٧	Vrite or Type Committee Name	vancing United Leadership PAC			
6.		ganization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor		
	Mailing Address	911 Central Avenue #362			
		Albany , NY	12206		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representat	ive X Leadership PAC Sponso		
7.	Custodian of Records: Idention books and records.	fy by name, address (phone number optional) and position of the person	in possession of committee		
	Herl, Susar	ne, , ,			
	Mailing Address	796 Murray Road			
		Kingston	12401		
	Tille ou Desilies —	CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼ Assistant Treasurer		45 853 - 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 Jordan, Short Treasurer	ıron, , ,			
	Mailing Address	1055 Brierwood Boulevard			
		Schenectady	12308		
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲		
	Treasurer	5· Telephone number	18 377 3219		

FEC Form	I (Revised 02/2009)	Page 4			
Full Name of Designated Agent	Herl, Susanne, , ,				
Mailing Address	796 Murray Road				
	Kingston	12401			
	CITY ▲ STATE	▲ ZIP CODE ▲			
Title or Position		0.45			
Assistant Treasu	rer Telephone number	845 - 853 - 4393			
	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, [Name of Bank, Depository, etc.				
	Trustco Bank				
Mailing Address	1220 Ulster Avenue				
	Kingston	12401			
	CITY ▲ STATE	▲ ZIP CODE ▲			
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲ STATE	▲ ZIP CODE ▲			

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ H98 'HC' 5 'F9 DCFH Z G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

The amended Form 1 Statement of Organization is in response to RFAI dated March 26, 2024, and amends the name of the political committee in compliance with FEC regulations.

Form/Schedule: Transaction ID: