PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) MATHEWS COUNTY DEMOCRATIC COMMITTEE PO Box 1111 ADDRESS (number and street) (Check if address is changed) Mathews 23109 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mathewsdems98@gmail.com (Check if address X is changed) Optional Second E-Mail Address |deschak.janet@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00682393 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. Deschak, Janet, , , Type or Print Name of Treasurer Deschak, Janet, , , [Electronically Filed] 04 12 2021 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

FF	C Form 1 (Revised 02/2009)	Page <b>2</b>
TYPE (	OF COMMITTEE	. 490 =
Candi (a)	idate Committee:  This committee is a principal campaign committee. (Complete the candidate information below.)	
(a) (b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Com	
Name o	information below.) of .	
Candida	ate	
Candida Party A	ate Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candida		
Party	Committee:  (National, State	(Democratic,
(d)		Republican, etc.) Party.
Politic	cal Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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.)	
Joint F	Fundraising 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
	Committees Participating in Joint Fundraiser	
	1. FEC ID number	
	2.               FEC ID number C	
	3.	
	4.	

FEC <b>Form 1</b> (Revised 0	12/2009)	Page <b>3</b>
Write or Type Committee Name		. ago u
MATHEWS CO	UNTY DEMOCRATIC COMMITTEE	
	rganization, Affiliated Committee, Joint Fundraising Representative, or	r Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Identification books and records.</li> </ol>	tify by name, address (phone number optional) and position of the pers	son in possession of committee
Deschak, J	anet, , ,	
	P.O. Box 1111	
Mailing Address	Mathews Cty Democratic Committee	
	Mathews VA	23109
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	3 965 4130
Treasurer: List the name and any designated agent (e.g., a	l address (phone number optional) of the treasurer of the committee; a ssistant treasurer).	nd the name and address of
Full Name Deschak, J. of Treasurer	anet, , ,	
Mailing Address	P.O. Box 1111	
Ç	Mathews Cty Democratic Committee	
	Mathews   VA	23109
Title on Desiries	CITY STATE	ZIP CODE
Title or Position Treasurer	703	3   965   4130

	<b>n 1</b> (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent	Bridge, Christine, , ,	
	P.O. Box 1111	
Mailing Address		
	Mathews Cty Democratic Committee	
	Mathews VA 23109	
	CITY STATE	ZIP CODE
Title or Position Chair		972
	Depositories: List all banks or other depositories in which the committee deposits funds, hold oxes or maintains funds. Depository, etc.	
safety deposit be	Depository, etc.  Chesapeake Bank  P.O. Box 1078	
safety deposit be Name of Bank,	Depository, etc.  Chesapeake Bank  P.O. Box 1078	
safety deposit be Name of Bank,	Depository, etc.  Chesapeake Bank  P.O. Box 1078	
safety deposit be Name of Bank,	Chesapeake Bank  P.O. Box 1078	ZIP CODE
safety deposit be Name of Bank,	Chesapeake Bank  P.O. Box 1078  Mathews  CITY  STATE	
safety deposit be Name of Bank, Mailing Address	Chesapeake Bank  P.O. Box 1078  Mathews  CITY  STATE	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Chesapeake Bank P.O. Box 1078  Mathews  CITY  STATE  Depository, etc.	
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Chesapeake Bank P.O. Box 1078  Mathews  CITY  STATE  Depository, etc.	
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Chesapeake Bank P.O. Box 1078  Mathews  CITY  STATE  Depository, etc.	