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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. Federal Independent Campaign Committee 47 W Polk Ste 100-252 ADDRESS (number and street) (Check if address is changed) Chicago 60605 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS indcamcom2021@gmail.com (Check if address is changed) Optional Second E-Mail Address ∣digasaki@yahoo.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00262923 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. Igasaki, David, , , Type or Print Name of Treasurer Igasaki, David, , , [Electronically Filed] 04 19 2022 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

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	orm 1 (Revised 02/2009)  COMMITTEE	Page <b>2</b>
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (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 Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC <b>Form 1</b> (Revised	02/2009)	Page <b>3</b>
Write or Type Committee Nam	ie	
Federal Indepe	endent Campaign Committee	
•	Organization, Affiliated Committee, Joint Fundraising Representative	, or Leadership PAC Sponsor
NONE		
<u> </u>		<u> </u>
Mailing Address		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representa	ative Leadership PAC Sponsor
Relationship.	/ Alliated Committee South Landraising Represente	200 200 200 200 200 200 200 200 200 200
. Custodian of Records: Ide	entify by name, address (phone number optional) and position of the p	person in possession of committee
books and records.		
Patt, Aviv	ra Miriam, , ,	
Mailing Address	1165 N Milwaukee Ave Apt 208	
	Chicago	60642
Title or Position	CITY STATE	ZIP CODE
Custodian	Telephone number	[-] [-] [
	Telephone number	
<ol> <li>Treasurer: List the name are any designated agent (e.g.,</li> </ol>	nd address (phone number optional) of the treasurer of the committee assistant treasurer).	; and the name and address of
Full Name Igasaki, D	Pavid, , ,	
of Treasurer	2000 NU lalata d	
Mailing Address	3232 N Halsted	
	Chicago	7ID CODE
Title or Position	CITY STATE	ZIP CODE
	Telephone number	

FEC Form 1 (Re	evised 02/2009)	Page <b>4</b>
Full Name of Designated Agent White	ehead, Rich, , ,	
Mailing Address	26 Bigelow	
	Park Forest IL CITY STATE	ZIP CODE
Title or Position Chair	Telephone number	
safety deposit boxes or		sits funds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds.  tory, etc.  F Bank	sits funds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc.	sits funds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds.  tory, etc.  F Bank	sits funds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds.  tory, etc.  F Bank  1200 S Wabash	
safety deposit boxes or Name of Bank, Deposit	maintains funds.  tory, etc.  F Bank  1200 S Wabash  Chicago  IL  CITY  STATE	60605
safety deposit boxes or Name of Bank, Deposit  TCI  Mailing Address	maintains funds.  tory, etc.  F Bank  1200 S Wabash  Chicago  IL  CITY  STATE	60605
safety deposit boxes or Name of Bank, Deposit  TCI  Mailing Address	maintains funds.  tory, etc.  F Bank  1200 S Wabash  Chicago  IL  CITY  STATE	60605
safety deposit boxes or Name of Bank, Deposit  TCI  Mailing Address  Name of Bank, Deposit	maintains funds.  tory, etc.  F Bank  1200 S Wabash  Chicago  IL  CITY  STATE	60605
safety deposit boxes or Name of Bank, Deposit  TCI  Mailing Address  Name of Bank, Deposit	maintains funds.  tory, etc.  F Bank  1200 S Wabash  Chicago  IL  CITY  STATE	60605

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

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

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h). Joint Fundraising	1	FEC ID number	C
1		FEC ID number	
2			C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected O	rganization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spor
Mailing Address			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify to Igasaki, Da	by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC S
esignated Agent: Identify b	oy name, address (phone number – optional) vid, , ,	int Fundraising Represent	Leadership PAC S
esignated Agent: Identify to Igasaki, Da	oy name, address (phone number – optional) vid, , ,  3232 N Halsted		
esignated Agent: Identify to Igasaki, Da	oy name, address (phone number – optional) vid, , ,  3232 N Halsted  Chicago		60657
esignated Agent: Identify by Igasaki, Da Full Name   Mailing Address	oy name, address (phone number – optional) vid, , ,  3232 N Halsted  Chicago	STATE ▲	60657 ZIP CODE <b>A</b>
esignated Agent: Identify b Igasaki, Da Full Name L	oy name, address (phone number – optional) vid, , ,  3232 N Halsted  Chicago	STATE ▲	60657
esignated Agent: Identify by Igasaki, Date	oy name, address (phone number – optional) vid, , ,  3232 N Halsted  Chicago  CITY   es: List all banks or other depositories in whice	STATE A Telephone Number	60657 ZIP CODE <b>A</b>
esignated Agent: Identify by Igasaki, Da Full Name   Mailing Address	oy name, address (phone number – optional) vid, , ,  3232 N Halsted  Chicago  CITY   es: List all banks or other depositories in whice	STATE A Telephone Number	60657 ZIP CODE <b>A</b>
esignated Agent: Identify to Igasaki, Date   Full Name   Mailing Address  TITLE OR POSITION Treasurer  anks or Other Depositories   fety deposit boxes or main   ame of Bank,	oy name, address (phone number – optional) vid, , ,  3232 N Halsted  Chicago  CITY   es: List all banks or other depositories in whice	STATE A Telephone Number	60657 ZIP CODE <b>A</b>
esignated Agent: Identify to Igasaki, Date   Full Name   Mailing Address  TITLE OR POSITION Treasurer  anks or Other Depositories   fety deposit boxes or main   ame of Bank,	oy name, address (phone number – optional) vid, , ,  3232 N Halsted  Chicago  CITY   es: List all banks or other depositories in whice	STATE A Telephone Number	60657 ZIP CODE <b>A</b>
esignated Agent: Identify by Igasaki, Date   Full Name   Mailing Address  TITLE OR POSITION Treasurer  anks or Other Depositorie   affety deposit boxes or main   ame of Bank,   epository, etc.	oy name, address (phone number – optional) vid, , ,  3232 N Halsted  Chicago  CITY   es: List all banks or other depositories in whice	STATE A Telephone Number	60657 ZIP CODE <b>A</b>

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

FEC Form 1S (Revised 02/2017)

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5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:			
	1.		FEC	ID number	C
	2.	<u> </u>	FEC	ID number	C
	3		FEC	ID number	C
	4		FEC	ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising R	epresentativ	e, or Leadership PAC Sponsor
	Mailing Address				
	Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Joint Fundrais	ing Represent	ative Leadership PAC Sponsor
8.		v by name, address (phone number – option va Miriam, , , 60642	nal)		
	Mailing Address	1165 N Milwaukee Ave Apt 208			
		Chicago		IL	60647
	TITLE OR POSITION	▼ CITY ▲		STATE ▲	ZIP CODE ▲
			Telephone	Number _	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in intains funds.	which the comr	nittee deposit	is funds, holds accounts, rents
	Depository, etc.				
	Mailing Address				
					ZIP CODE ▲