Image# 201710179075775	866		
FEC FORM 1	STATEMENT ORGANIZATI		PAGE 1 / 7
1. NAME OF COMMITTEE (in full		ample: If typing, type	L2FE4M5
	PO BOX 2013		
ADDRESS (number and si			
is changed)			MA 01970       STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL A	DDRESS		
(Check if addr is changed)			
	Optional Second E-Mail Address	SCONSULTING,NET	
COMMITTEE'S WEB PAG			
2. DATE 08	/ D D / Y Y Y Y 16 2017		
3. FEC IDENTIFICATI	ON NUMBER ► C C00653	295	
4. IS THIS STATEMEN	T NEW (N) OR	AMENDED (A)	
I certify that I have exam	ined this Statement and to the best of my	v knowledge and belief it is	true, correct and complete.
Type or Print Name of Tr	easurer TATTRIE, DARRYL, , ,		
Signature of Treasurer	TATTRIE, DARRYL, , ,	[Electronically Filed] De	te 10 / D D / Y Y Y Y Y 10 17 2017
NOTE: Submission of false	, erroneous, or incomplete information may s ANY CHANGE IN INFORMATION SI		Statement to the penalties of 2 U.S.C. §437g.
Office Use Only		For further information conta Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	rct: FEC FORM 1 (Revised 06/2012)

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F	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Can	didate	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. (Com information below.)	plete the candidate
Name Cand	e of lidate		
	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	t <mark>y Co</mark> n	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Part
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	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)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	egregated fund or part
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	JOSH BUTNER FOR CONGRESS	637389
	2.	JASON CROW FOR CONGRESS	637363
	3.		649327
	4.	KEN HARBAUGH FOR CONGRESS	646752

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Title or Position

## SERVE AMERICA VICTORY FUND

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundra	aising Representative	Leadership PAC Sponsor
7. Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and	position of the person	in possession of committee
	DARRYL, , ,		
Full Name	PO BOX 2013		

Telephone number	

STATE

ZIP CODE

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).

CITY

Full Name of Treasurer	TATTRIE, DARRYL, , ,
Mailing Address	PO BOX 2013
	SALEM     MA     01970
	CITY STATE ZIP CODE
Title or Position	Telephone number

Full Name of Designated Agent	GILLIGAN,	TARA, , ,																1								
Mailing Address			13																							
		SALEM												_ N	1A 			0	970							
					СП	Y								STA	ΤE					Z	IP (	COL	DE			
Title or Position									Tel	eph	one	nı	ımt	ber			1	1	-[					1		

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.

Mailing Address	275 7TH AVE		
	NEW YORK	NY 10001 –	
	CITY	STATE ZIP CODE	
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE ZIP CODE	

TITLE OR POSITION V

FEC Form 1S (Revised 02/2017)	Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9	Page _5_ of 7
5(g)or(h). Joint Fundraising Particip	ant:	
	ESS	C C00641191
MCCREADY FOR CON	GRESS FEC ID number	C C00641381
FRIENDS OF RD	FEC ID number	C C00637918
3. PATRICK RYAN FOR C		C C00647115
6. Name of Any Connected Organizat	ion, Affiliated Committee, Joint Fundraising Representativ	e, or Leadership PAC Sponsor
Mailing Address		
Relationship:	CITY A STATE A	
Connected Organizati	ion Affiliated Committee Joint Fundraising Represent	ative Leadership PAC Sponsor
8. <b>Designated Agent:</b> Identify by name,	, address (phone number – optional)	
Full Name		
Mailing Address		

ZIP CODE

STATE

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.

CITY

Name of Bank, Depository, etc.																							
Mailing Address	L																						
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FEC Form 1S (Revised 02/2017)	Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or		Page _6_ of 7
5(g) or (h). Joint Fundraising Participant:	00100500	_	
	CONGRESS FEC	ID number	C00650077
MIKIE SHERRILL FOR CON	GRESS	ID number C	C00640003
CHRISSY HOULAN FOR CC	NGRESS FEC	ID number	C00637371
AMY MCGRATH FOR CONG	GRESS FEC	ID number	C00646745
6. Name of Any Connected Organization, A	ffiliated Committee, Joint Fundraising R	epresentative, o	r Leadership PAC Sponsor
Mailing Address			
			-
Relationship:	CITY A	STATE	
Connected Organization	Affiliated Committee Joint Fundrais	ing Representative	Leadership PAC Sponsor
8. <b>Designated Agent:</b> Identify by name, addre	ess (phone number – optional)		
Full Name			
Mailing Address			
-			

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.

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CITY

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TITLE OR POSITION V

Name of Bank, Depository, etc.																								
Mailing Address																								
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STATE A

Telephone Number

ZIP CODE

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FEC Form 1S (Revised 02/2017)	rm 1S (Revised 02/2017) Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9										
5(g) or (h). Joint Fundraising Particip SERVE AMERICA PAC 1. 2. 3. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.		FEC ID number FEC ID number	C C00571174 C C								
6. Name of Any Connected Organiza	tion, Affiliated Committee, Joint Fund	raising Representative,	or Leadership PAC Sponsor								
Mailing Address											
Relationship:	CITY A	STATE A	ZIP CODE								
Connected Organiza	tion Affiliated Committee Join	t Fundraising Representati	ve Leadership PAC Sponsor								
8. Designated Agent: Identify by name	e, address (phone number – optional)										
Full Name											
Mailing Address											
TITLE OR POSITION ▼	CITY A	STATE A	ZIP CODE								
		elephone 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.																						<u> </u>		
Mailing Address																								
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