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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) State Democratic Executive Committee of Alabama PO Box 950 ADDRESS (number and street) (Check if address is changed) Montgomery 36101 ALCITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS peck@foxlawfirmllc.com (Check if address is changed) Optional Second E-Mail Address chris@pattonprocessing.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.aldemocrats.org (Check if address is changed) DATE 2019 C00005173 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. Fox, Peck, , , Type or Print Name of Treasurer Fox, Peck, , , [Electronically Filed] 07 2020 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

| TYPE O | | Page 2 |
|---------------------|---|---|
| Candid | F COMMITTEE date 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. (Cor information below.) | nplete the candidate |
| Name of Candidat | | |
| Candidate Party Aft | | State District |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Name of Candidat | | |
| Party (| Committee: | (Dama ayatia |
| (d) | This committee is a STA (National, State or subordinate) committee of the DEM | (Democratic, Republican, etc.) Party |
| Politica | al Action Committee (PAC): | |
| (e) | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co | nnected 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 s committee. (i.e., nonconnected committee) | egregated 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 | undraising Representative: | |
| (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for t | |
| (h) | 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 t committees/organizations, none of which is an authorized committee of a federal candidate. | |
| C | Committees Participating in Joint Fundraiser | |
| 1 | L L L L L L L L L L L L L L L L L L L | |
| | | |
| 2 | | |
| 2 | | |

| | - | | |
|----|---|--|-------------------------|
| l | FEC Form 1 (Revised | 02/2009) | Page 3 |
| W | /rite or Type Committee Name | е | |
| | State Democra | tic Executive Committee of Alabama | |
| 6. | Name of Any Connected (| Organization, Affiliated Committee, Joint Fundraising Representative, or Lead | ership PAC Sponsor |
| D | ollars for Democrats | | |
| | | | |
| | Mailing Address | 430 South Capitol St. E | |
| | g | Suite 300 | |
| | | Washington DC 20003 | 3 |
| | | CITY STATE | ZIP CODE |
| | Relationship: Connecte | d Organization Affiliated Committee Joint Fundraising Representative | Leadership PAC Sponsor |
| | Custodian of Records: Idea books and records. | ntify by name, address (phone number optional) and position of the person in | possession of committee |
| | Fox, Peck | , , , , | |
| | Full Name | ,PO Box 950 | |
| | Mailing Address | | |
| | | | |
| | | Montgomery AL 3610 | 1 |
| | Title or Position | CITY STATE | ZIP CODE |
| | Treasurer | Telephone number 334 | 262 - 2221 |
| 3. | Treasurer: List the name an any designated agent (e.g., | d address (phone number optional) of the treasurer of the committee; and the assistant treasurer). | name and address of |
| | Full Name Fox, Peck of Treasurer | ,,, | |
| | Mailing Address | PO Box 950 | |
| | | | |
| | | Montgomery AL 3610 | 1 |
| | Title or Position | CITY STATE | ZIP CODE |
| | Treasurer | | 262 2221 |

| | m 1 (Revised 02/2009) | Page 4 |
|---|---|----------|
| | | |
| Full Name of Designated | | |
| Agent | | |
| Mailing Address | | |
| | | |
| | CITY STATE | ZIP CODE |
| Title or Position | | |
| | Telephone number | |
| | | |
| | Depository, etc. | |
| | Depository, etc. Amalgamated Bank | |
| | Depository, etc. Amalgamated Bank ,275 Seventh Avenue | |
| Name of Bank, | Depository, etc. Amalgamated Bank 275 Seventh Avenue | |
| Name of Bank, | Depository, etc. Amalgamated Bank ,275 Seventh Avenue | |
| Name of Bank, | Depository, etc. Amalgamated Bank 275 Seventh Avenue | ZIP CODE |
| Name of Bank, | Depository, etc. Amalgamated Bank 275 Seventh Avenue New York NY 10011 CITY STATE | ZIP CODE |
| Name of Bank, Mailing Address | Depository, etc. Amalgamated Bank 275 Seventh Avenue New York NY 10011 CITY STATE Depository, etc. | ZIP CODE |
| Name of Bank, Mailing Address | Depository, etc. Amalgamated Bank 275 Seventh Avenue New York New York CITY STATE Depository, etc. Wells Fargo 1753 Pinnacle Drive | ZIP CODE |
| Name of Bank, Mailing Address Name of Bank, | Depository, etc. Amalgamated Bank 275 Seventh Avenue New York New York CITY STATE Depository, etc. Wells Fargo 1753 Pinnacle Drive | ZIP CODE |
| Name of Bank, Mailing Address Name of Bank, | Depository, etc. Amalgamated Bank 275 Seventh Avenue New York New York CITY STATE Depository, etc. Wells Fargo 1753 Pinnacle Drive | ZIP CODE |

FEC Form 1S (Revised 02/2017)

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

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| h). Joint Fundraisi | • | | |
|--|---|------------------------------|---------------------------------------|
| 1. | | FEC ID number | C |
| 2. | | FEC ID number | С |
| 3. | | FEC ID number | С |
| 4. | | FEC ID number | С |
| ame of Any Connected | Organization, Affiliated Committee, Joint Fund | raising Representative | e, or Leadership PAC Spon |
| AL Party Victory | | | , , , , , , , , , , , , , , , , , , , |
| | | | |
| Mailing Address | 430 South Capitol St. SE | | |
| | | | |
| | Washington | DC | 20003 |
| Relationship: | CITY A | STATE ▲ | ZIP CODE ▲ |
| Connecte | d Organization Affiliated Committee Joint | t Fundraising Representa | Leadership PAC S |
| | Affiliated Committee Joint Joint by by name, address (phone number – optional) | t Fundraising Represent | Leadership PAC Sp |
| esignated Agent: Identi | | t Fundraising Represent | Leadership PAC Sp |
| esignated Agent: Identi | | t Fundraising Represent | Leadership PAC Sp |
| esignated Agent: Identi | | t Fundraising Representation | Leadership PAC Sp |
| esignated Agent: Identi Full Name Mailing Address | fy by name, address (phone number – optional) | t Fundraising Representation | Leadership PAC Sp |
| esignated Agent: Identi | fy by name, address (phone number – optional) CITY | | |
| esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION | fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which | STATE A | ZIP CODE A |
| esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc | fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which | STATE A | ZIP CODE A |
| esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc | fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which | STATE A | ZIP CODE A |

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

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| 5(g) c | or(h). Joint Fundraisin | g Participant: | | |
|--------|--|---|------------------------|------------------------------|
| | 1 | | FEC ID number | C |
| | 2. | | FEC ID number | C |
| | 3. | | FEC ID number | C |
| | 4. | | FEC ID number | С |
| 6. | = | Organization, Affiliated Committee, Joint Fundrai | ising Representative | e, or Leadership PAC Sponsor |
| | Democratic Grass | roots Victory Fund | | |
| | | | | |
| | Mailing Address | 430 South Capitol Street SE | | |
| | | | | |
| | | Washington | DC | 20003 |
| | Relationship: | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| | Connected | Organization Affiliated Committee X Joint F | Fundraising Representa | ative Leadership PAC Sponsor |
| | | | | |
| 8. | Designated Agent: Identify Full Name | by name, address (phone number – optional) | | |
| 8. | | by name, address (phone number – optional) | | |
| 8. | Full Name | by name, address (phone number – optional) | | |
| 8. | Full Name | | | |
| 8. | Full Name | CITY A | STATE A | ZIP CODE A |
| 8. | Full Name | CITY A | | |
| 9. | Full Name Mailing Address TITLE OR POSITION | CITY Tele ies: List all banks or other depositories in which the | STATE ▲ | ZIP CODE A |

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

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| (h). Joint Fundraisi | ng rantopant. | | |
|--|--|----------------------------|-----------------------------|
| 1. | | FEC ID number | С |
| 2. | | FEC ID number | С |
| 3. | | FEC ID number | C |
| 4. | | FEC ID number | С |
| Name of Any Connected | I Organization, Affiliated Committee, Joint Fundr Y FUND | raising Representative | e, or Leadership PAC Sponso |
| | | | |
| | | | |
| Mailing Address | 1751 POTOMAC GREENS DR | | |
| | | | |
| | ALEXANDRIA | VA | 22314-6233 |
| Relationship: | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| | | Fundraising Representa | ative Leadership PAC Spo |
| Connecte | | Fundraising Representa | ative Leadership PAC Spo |
| Connecte Designated Agent: Identi | ed Organization Affiliated Committee | Fundraising Representa | ative Leadership PAC Spo |
| Connecte Designated Agent: Identi Full Name | ed Organization Affiliated Committee | Fundraising Representation | Leadership PAC Spo |
| Connecte Designated Agent: Identi Full Name | ed Organization Affiliated Committee | Fundraising Representation | Leadership PAC Spo |
| Connecte Designated Agent: Identi Full Name | Affiliated Committee Affiliated Committee Figure 1. Joint 1. Joint 2. Joi | Fundraising Representation | |
| Connecte Designated Agent: Identi Full Name Mailing Address | Affiliated Committee Affiliated Committee Figure 1. Joint 1. Joint 2. Joi | | |
| Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION | Affiliated Committee Affiliated Committee Ty Joint Ty by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which | STATE A | ZIP CODE A |
| Connected Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or management of Bank, Depository, etc. | Affiliated Committee Affiliated Committee Ty Joint Ty by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which | STATE A | ZIP CODE A |

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

FEC Form 1S (Revised 02/2017)

ormation and/or 9 Page $\frac{8}{}$ of $\frac{8}{}$

| | ng Participant: | | |
|---|---|--|---------------------------|
| 1. | | FEC ID number | С |
| 2 | | FEC ID number | С |
| 3. | | FEC ID number | C |
| 4. | | FEC ID number | С |
| | | | |
| | Organization, Affiliated Committee, Joint Fun | ndraising Representative | e, or Leadership PAC Spor |
| BIDEN VICTORY | ' FUND | | |
| | | | |
| | 430 SOUTH CAPITOL STREET SE | | |
| Mailing Address | | | |
| | | | |
| | WASHINGTON | DC | 20003 |
| Relationship: | CITY A | STATE ▲ | ZIP CODE ▲ |
| Connecto | A first and Community and I | pint Fundraising Representa | |
| | Affiliated Committee | one rundraising nepresent | Leadership PAC S |
| esignated Agent: Identi | | Julic Fundraising Represent | Leadership PAC S |
| esignated Agent: Identi | | Tundraising Represent | Leadership PAC S |
| esignated Agent: Identi | | July 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Leadership PAC S |
| esignated Agent: Identi | | | Leadership PAC S |
| esignated Agent: Identi | fy by name, address (phone number – optional) | | |
| esignated Agent: Identi Full Name Mailing Address | fy by name, address (phone number – optional) | | |
| esignated Agent: Identi Full Name | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank, | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc. | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc. | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |