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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) is changed) over the lines. IA/NC Senate 2020 918 Pennsylvania Ave SE ADDRESS (number and street) (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS zamore@capcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00721464 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. Zamore, Judith, , , Type or Print Name of Treasurer Zamore, Judith,,, [Electronically Filed] 01 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

FEC <b>F</b>	orm 1 (Revised 02/2009)	Page <b>2</b>
	COMMITTEE	. wyo <b>=</b>
Candidat	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. (Com information below.)	plete the candidate
Name of Candidate		
Candidate Party Affilia	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		
(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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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.)	
Joint Fun	draising Representative:	
(g) <b>x</b>	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
Cor	nmittees Participating in Joint Fundraiser	
1.	Cal for NC (US Senate) FEC ID number C C00	709410
2.	Theresa Greenfield for Iowa	708164
3.	FEC ID number	
4.		

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Write or Type Committee Name		
IA/NC Senate 2	020	
6. Name of Any Connected O	ganization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
. Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the persor	ı in possession of committee
Zamore, Ju	dith, , ,	
Mailing Address	918 Pennsylvania Ave SE	
J	_ 	
	Washington DC 2	20003
Title or Position	CITY STATE	ZIP CODE
	SIALE	ZII GODE
Treasurer	Telephone number	]-[
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and sistant treasurer).	the name and address of
Full Name Zamore, Jud of Treasurer	lith, , ,	
Mailing Address	918 Pennsylvania Ave SE	
	Washington DC 2	0003
Title or Position	CITY STATE	ZIP CODE
Treasurer	202	-  544  -  6960

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Full Name of Designated	I , , , , , , , , , , , , , , , , , , ,	
Agent		
Mailing Address		
	CITY STATE Z	IP CODE
Title or Position		1 2
Name of Bank,		
Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  DC 20006	ZIP CODF
Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Z	ZIP CODE
Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Z	ZIP CODE
Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Z	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Z	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Z	ZIP CODE