FEC

STATEMENT OF **ORGANIZATION**

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FORM 1	·										
A NAME OF		(0) 1 "						Office U	se Only		
 NAME OF COMMITTEE (in full)) ×	(Check if nam is changed)		mple:If typing, the lines.	type	12FE	4M5				
MaDarmatt DA	_										
McDermott PA											
ADDRESS (number and s		orth Capitol Stree	et, N.W.								
(Check if addr	ress										
io changea)	Wash	ington			1	DÇ	2	0001-15	31	_1 .	1
		CITY A				STATE	」		ZIP	CODE 4	
COMMITTEE'S E-MAIL /	ADDRESS										
(Check if addr		I@mwe.com									
is changed)	Silec										
	Option	al Second E-Ma	ail Address								1
COMMITTEE'S WEB PA	GE ADDRESS	(URL)									
(Check if addr	ess					1 1				1 1	1
is changed)											
2. DATE 07	28	2023									
3. FEC IDENTIFICAT	ION NUMBER	• C	C0029970	1							
4. IS THIS STATEMEN	IT NE	:W (N) O	R X	AMENDE	ED (A)						
certify that I have exan	nined this State	ment and to the	best of my l	knowledge and	d belief it i	s true, c	orrect a	nd com	plete.		
Type or Print Name of Ti	reasurer Neel.	Sam, C, ,									
		, 1									
Signature of Treasurer	Neel, Sam, C,	,				Date	08 		6	202	24
NOTE: Submission of false		incomplete inform						e pena	ties of	52 U.S.C	C. §30109.
Office				For further info	ormation co	ntact·					

е			For further information contact:
			Federal Election Commission
,			Toll Free 800-424-9530 Local 202-694-1100
,	e e y		

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	TYPE OF COMMITTEE:					
	Candidate 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. (Complete the candidate information below.)						
Name of Candidate						
	Party Affiliation Sought: House Senate President	tate				
	c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
	Party Committee: d) This committee is a (National, State or subordinate) committee of the Republican, etc.) F	Party				
	Political Action Committee (PAC):					
	e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	nization is a:				
	Corporation Corporation w/o Capital Stock Labor Organiza	ation				
	Membership Organization Trade Association Cooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund committee. (i.e., nonconnected committee)	or party				
	In addition, this committee is a Lobbyist/Registrant PAC.					
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	g) This committee is an independent expenditure-only political committee (Super PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	Joint Fundraising Representative:					
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, at least one of which is an authorized committee of a federal candidate.	political				
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	political				
	Committees Participating in Joint Fundraiser					
	1C					

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٧	Irite or Type Committee Name				
	McDermott PAC				
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PA					
	NONE				
	Mailing Address				
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso		
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the person in poss	ession of committee		
	Neel, Sam,	C, ,			
	Full Name	500 North Capitol Street, N.W.			
	Mailing / Ida iooo				
		Washington			
		Washington DC 2000			
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	756 - 8821		
3.	Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and the ssistant treasurer).	name and address of		
	Full Name Neel, Sam, of Treasurer	C, ,			
	Mailing Address	500 North Capitol Street, N.W.			
		Washington DC 2000	01		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼		750		
	Treasurer	Telephone number =	756 - 8821		

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Full Name of Designated			
Agent			
Mailing Address			
Title or Position		TATE A	ZIP CODE ▲
	Telephone number	r	
	Depositories: List all banks or other depositories in which the committee dives or maintains funds.	deposits funds, hold	ls accounts, rents
Name of Bank, D	epository, etc.		
	United Bank		
Mailing Address	1275 Pennsylvania Avenue, NW		
	Washington	DC 20004	
	CITY ▲ ST	ATE A	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	<u> </u>		
Mailing Address			
	CITY ▲ ST	ATE A	ZIP CODE ▲

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' + H9 A = N5 H + CB

Form/Schedule: F1A Transaction ID:

Committee name change

Form/Schedule: Transaction ID: