FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. House Victory Project 2024 600 Pennsylvania Ave SE #15180 ADDRESS (number and street) (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address fec@capcompliance.com is changed) Optional Second E-Mail Address zamore@capcompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00873406 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Type or Print Name of Treasurer Zamore, Judith, , Date 09 13 2024 Signature of Treasurer Zamore, Judith, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

FE	C Form 1 (Revised 03/2022) Pag	e 2
5.	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 candidation information below.)	te
	Name of Candidate	
	Candidate Office State Party Affiliation Sought: House Senate President District	-
	(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.) Part	ty
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	ation is a:
	Corporation Corporation w/o Capital Stock Labor Organization	n
	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 segregated fund or	party
	committee. (i.e., nonconnected committee)	
	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:	
	(i) X This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more po- committees/organizations, at least one of which is an authorized committee of a federal candidate.	litical
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more po- committees/organizations, none of which is an authorized committee of a federal candidate.	litical
	Committees Participating in Joint Fundraiser	
	1. ADAM GRAY FOR CONGRESS C C00801431	
	2. MARIE FOR CONGRESS C C00806174	

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V	/rite or Type Committee Name	·			
	House Victory Pr	roject 2024			
3.	-	rganization, Affiliated Committee	, Joint Fundraising Repre	esentative, or Leaders	ship PAC Sponsor
	NONE				
	Mailing Address		1 1 1 1 1 1 1 1		
					[-] [
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organiza	ation Joint Fundraising	Representative	Leadership PAC Sponsor
7.	Custodian of Records: Identi books and records.	fy by name, address (phone numbe	er optional) and position o	f the person in possess	ion of committee
	Zamore, Ju	dith, , ,			ı
	Full Name	600 Pennsylvania Ave SE #15180			
	Mailing Address				
		Washington		DC 20003	
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone num	ber 202 - L	544 - 6960
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number option assistant treasurer).	nal) of the treasurer of the	committee; and the na	ame and address of
	Full Name Zamore, Ju	dith, , ,			1
	of Treasurer	600 Denneutrania Ava SE #45400			
	Mailing Address	600 Pennsylvania Ave SE #15180			
		Washington		DC 20003	
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone num	ber	544 6960

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Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone number	
Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in vintains funds.	which the committee deposits fun	nds, holds accounts, rents
Name of Bank, Depository,	etc.		
Amalga	amated Bank		
Mailing Address	1825 K St NW		
	Washington	DC	20006
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

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

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(h). Joint Fundraisin	g Participant:				
RUDY SALAS FOR COM	NGRESS		FEC II) number	C C00791756
2. JOSH RILEY FOR CO	ONGRESS		FEC II) number	C C00793760
3.	A		FEC II) number	C C00773820
4. BACCAM FOR IOWA			FEC II) number	C C00856021
Name of Any Connected	Organization, I	Affiliated Committee, Joint	Fundraising Rep	oresentativo	e, or Leadership PAC Sponsor
Mailing Address					
	1		, , , , , ,	1 . 1	I I-I
Relationship:		CITY A		STATE A	ZIP CODE ▲
Designated Agent: Identify	by name, add	ress (phone number – optio	nal)		
Full Name					
	1				
Mailing Address					
Mailing Address					
Mailing Address					
Mailing Address TITLE OR POSITION		CITY A		STATE A	ZIP CODE A
		CITY A	Telephone N		ZIP CODE A

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

1. HERTEL FOR MICHIGAN 1. MONDAIRE FOR CONGRES 2. DON DAVIS FOR NC 3. SUSAN WILD FOR CONGRES 4. SUSAN WILD FOR CONGRES Mailing Address Mailing Address		FEC ID number FEC ID number FEC ID number FEC ID number FEC ID number	C C00844480 C C00711150 C C00795211 C C00658567 e, or Leadership PAC Sponsor
2. DON DAVIS FOR NC 3. SUSAN WILD FOR CONGRESS 4. SUSAN Connected Organiz	S	FEC ID number	C C00795211
3. DON DAVIS FOR NC 3. SUSAN WILD FOR CONGRESS 4. Name of Any Connected Organia		FEC ID number	C C00658567
4. SUSAN WILD FOR CONGRESS Name of Any Connected Organiz			
	zation, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Sponsor
	zation, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Sponsor
Mailing Address			
Mailing Address			
Mailing Address			
L			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected Organi	zation Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Spons
Full Name			
Mailing Address			
L			
TITLE OR POSITION ▼	CITY A	STATE ▲	ZIP CODE ▲
		Telephone Number	

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

5(g)	or(h). Joint Fundraisi r	ng Participant:			
	WILL ROLLINS FOR C	ONGRESS	FEC	ID number	C00792507
	2. DEREK TRAN FOR	CONGRESS	FEC	ID number	C C00851790
	3. CARAVEO FOR CON	GRESS	FEC	ID number	C C00787788
	4. COMMITTEE TO ELE	CT JARED GOLDEN	FEC	ID number	C C00653816
6.	Name of Any Connected	Organization, Affiliated Committee,	Joint Fundraising R	epresentative,	or Leadership PAC Sponsor
	Mailing Address				
		1	1	1 . 1	
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committe	e Joint Fundrais	ng Representati	ve Leadership PAC Sponsor
8.	Designated Agent: Identif	y by name, address (phone number -	- optional)		
8.	Designated Agent: Identif	y by name, address (phone number -	optional)		
8.		y by name, address (phone number -	optional)		
8.	Full Name	y by name, address (phone number -	optional)		
8.	Full Name	y by name, address (phone number -	optional)		
8.	Full Name _ _ _ Mailing Address	CITY	optional)	STATE A	ZIP CODE A
8.	Full Name	CITY A		STATE A	ZIP CODE A
8.	Full Name _ _ _ Mailing Address	CITY	- optional) Telephone		ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m	CITY A	Telephone	Number	
	Full Name Mailing Address TITLE OR POSITION	CITY A	Telephone	Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank,	CITY A	Telephone	Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	CITY A	Telephone	Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	CITY A	Telephone	Number	

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

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r(h). Joint Fundraisin	g Participant:				
1. ALTMAN FOR CONGRE	ESS 		FEC ID n	umber	C C00841643
2. GABE VASQUEZ FO	R CONGRESS		FEC ID n	umber	C C00789404
3. GILLEN FOR NY			FEC ID n	umber	C C00840165
4. KAPTUR FOR CONGR	RESS		FEC ID n	umber	C C00154625
Name of Any Connected	Organization, A	ffiliated Committee, Joint	Fundraising Repres	sentative,	or Leadership PAC Sponsor
Mailing Address	1				
Mailing Address					
Dolotionship		OITY A			7/D 00DF 4
Relationship:		CITY ▲	5	TATE ▲	ZIP CODE ▲
	by name, addre	ess (phone number – option	iai)		
Full Name					
Full Name	1				
Full Name					
Mailing Address		CITY A	STA	ATE A	ZIP CODE A
		CITY A	STA		ZIP CODE A

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

5(g) or (h).	Joint Fundraising	Participant:		_	
-	EMILIA SYKES FOR CO	NGRESS	FEC	ID number	C C00801274
2	2. CARTWRIGHT FOR (CONGRESS	FEC	ID number	C C00509968
(3. AMISH FOR ARIZONA		FEC	ID number	C C00836502
4	4. MARY PELTOLA FOR A	ALASKA	FEC	ID number	C C00812388
6. Nan	ne of Any Connected (Organization, Affiliated Commi	ttee, Joint Fundraising F	Representative	, or Leadership PAC Sponsor
L					
	Mailing Address				
	Relationship:	CITY		STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Com	mittee Joint Fundrais	sing Representat	Leadership PAC Sponsor
	ignated Agent: Identify Full Name	by name, address (phone num	per – optional)		
		by name, address (phone num	per – optional)		
	Full Name	by name, address (phone num	per — optional)		
	Full Name	by name, address (phone numi	per – optional)		
	Full Name	CITY	per – optional)	STATE A	ZIP CODE A
	Full Name	CITY	per – optional)		ZIP CODE A
9. Ban safe Nam	Full Name Mailing Address TITLE OR POSITION Less or Other Depositor of the deposit boxes or maine of Bank,	CITY A	Telephone ositories in which the com	Number	funds, holds accounts, rents
9. Ban safe	Full Name Mailing Address TITLE OR POSITION ks or Other Depositor ty deposit boxes or maine of Bank, ository, etc.	CITY A	Telephone	Number	funds, holds accounts, rents
9. Ban safe	Full Name Mailing Address TITLE OR POSITION Less or Other Depositor of the deposit boxes or maine of Bank,	CITY A	Telephone ositories in which the com	Number	funds, holds accounts, rents

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

5(g) or (l	h). Joint Fundraisin	g Participant:			
	MARLINGA FOR CONG 1.	RESS		FEC ID number	C C00807727
	2. FRIENDS OF JANEL	_E STELSON		FEC ID number	C C00852368
	3. MONICA TRANEL FOR	R MONTANA		FEC ID number	C C00845008
	4. CHRIS DELUZIO FOR	CONGRESS		FEC ID number	C C00787648
6. N a	ame of Any Connected	Organization, Affiliated Co	ommittee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
	Mailing Address				
	Relationship:	C	ITY 🛦	STATE ▲	ZIP CODE ▲
8. D e				ndraising Representa	ttive Leadership PAC Sponsor
o. De	esignated Agent: Identify	by name, address (phone	number - optional)		
o. De	Full Name	by name, address (phone	number – optional)		
o. De		by name, address (phone	number – optional)		
O. De	Full Name	by name, address (phone	number – optional)		
O. De	Full Name	by name, address (phone	number – optional)		
O. DR	Full Name	CIT	number – optional)	STATE A	ZIP CODE A
O. DR	Full Name	CIT	Y A	STATE A	ZIP CODE A
 9. B a sa	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposition boxes or main arms of Bank,	CIT ies: List all banks or other	Y A Telep depositories in which the	hone Number	s funds, holds accounts, rents
— 9. B a sa	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftety deposit boxes or ma ame of Bank, epository, etc.	CIT ies: List all banks or other	Y A Telep depositories in which the	hone Number	
— 9. B a sa	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposition boxes or main arms of Bank,	CIT ies: List all banks or other	Y A Telep depositories in which the	hone Number	s funds, holds accounts, rents