NONE OF ON OM ODSONONN

STATEMENT OF

FORM 1	ORGANIZAT	ION	FEC MAILCENTER
7 011101 1		<u></u>	025 APR -7 all 11: 12
NAME OF COMMITTEE (in full)		Example: If typing, type over the lines.	12FE4M5
MARGARITA MARIA	A CARRANZA FOR CONGRESS I		
ADDRESS (number and s	ireet) 12651 AMBQY,AVENUE,		
(Check if addischanged)	ress		
	SYLMAR		CA 91342
COMMITTEE'S E-MAIL	ADDRESS		
(Check if addis changed)	ress 12651 AMBOY AVENUE,	SYLMAR, CA 91342 2) a I marque armine 1
3 ,	Optional Second E-Mail Addres	s	
	[&Di21/margine	wmne 44	mail can
COMMITTEE'S WEB PA	• •		
☐ ◀ (Check if add is changed)	ress		
2. DATE 0.4 0.1 2025			
3. FEC IDENTIFICATION NUMBER ► C 00807263			
4. IS THIS STATEMEN	NT V 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.			
Type or Print Name of Treasurer CHRTSTOPHER ALTOUNIAN			
Signature of Treasurer	Mytyhli	Man D	ate 04'01'2025
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 Use		For further information cont. Federal Election Commission Toll Free 800-424-9530	FEC FORM 1 (Revised 03/2022)

Local 202-694-1100

FEC Form 1 (Revised 03/2022)		Page 2
5. TYPE OF COMMITTEE:		
Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate information below.)		
Name of Candidate <u>MARGAR₄TA MAR</u>	RIĄ CARRĄNZĄ	
Candidate Party Affiliation REP	Office Sought: House Senate Preside	State CA ont District 29
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate MARGARITA MAR	RIA GARRANZA	
Party Committee:	(National, State (De	emocratic,
(d) This committee is a		publican, etc.) Party
Political Action Committee (PAC (e) This committee is a separate	C): e segregated fund. (Identify connected organization on line 6.) Its	connected organization is a:
Corporation	Corporation w/o Capital Stock	Labor Organization
Membership Organization		Cooperative
In addition, this co	ommittee is a Lobbyist/Registrant PAC.	
teri	poses more than one Federal candidate, and is NOT a separate s	egregated fund or party
In addition, this co	ommittee is a Lobbyist/Registrant PAC.	
In addition, this co	ommittee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an indepen	endent expenditure-only political committee (Super PAC).	
	ommittee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).		
<u> </u>	ommittee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representati	ive:	
(1) 4 8	tributions, pays fundraising expenses and disburses net proceeds least one of which is an authorized committee of a federal candi	-
(1) 4 4	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.	
Committees Participating in Joint Fundraiser		
1.	<u></u>	
21	C	

	FEC Form 1 (Revised	1 03/2022)	Page 3
٧	Vrite or Type Committee Nar	ne	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Represent	tative, or Leadership PAC Sponsor
			
	Mailing Address		
			<u></u>
		CITY ▲ STA	TE ▲ ZIP CODE ▲
	Relationship: Connecte	ed Organization Affiliated Organization Joint Fundraising Rep	presentative Leadership PAC Sponso
7.	Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the	person in possession of committee
	Full Name		
	Mailing Address		
		CITY ▲ STA	TE ▲ ZIP CODE ▲
	Title or Position ▼		
		Telephone number	
8.	Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the com	nmittee; and the name and address of
	Full Name of Treasurer CHRIS	STOPHER ALTOUNIAN	
	Mailing Address	12651 AMBOY, AVENUE	
			
		SYLMAR	A 91342 -
	Title on D. W	CITY ▲ STA	TE ▲ ZIP CODE ▲
	Title or Position ▼	ı	lava I lee: I lees
ı	TREASURER	Telephone number	818 - 554 - 2890 1

1		
	<u> </u>	<u></u>
· 		
CITY ▲	STATE ▲	ZIP CODE ▲
Telephone n	umber	-
	ittee deposits funds,	holds accounts, rents
ository, etc.		
CHASE BANK		
300,BRAND BLVD	<u> </u>	
SAN FERNANDO	CA 9	1340, - , , ,
L SAN FERNANDO I I I I I I I I I I I I I I I I I I I	لككا لغ	1340
	repositories: List all banks or other depositories in which the comms or maintains funds. CHASE BANK 300 BRAND BLVD	Telephone number positories: List all banks or other depositories in which the committee deposits funds, sor maintains funds. pository, etc. CHASE BANK,

CITY A

ZIP CODE A

STATE A

NONE TO LESS TO LESS TO LENGTH

Mailing Address

FEC Form 1S (Revised 03/2022)

Optional Supplemental Information for Lines 5(i) or (j), 6, 8 and/or 9

Page of

		
5(i)	or(j). Joint Fundraisi i	Participant:
	1.	FEC ID number C
	2.	FEC ID number C
	3.	FEC ID number
	4.	FEC ID number C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
	Mailing Address	
	Relationship:	CITY ▲ STATE ▲ ZIP CODE ▲
	_	
	Connecte	Organization
8.	Designated Agent: Identif	by name, address (phone number – optional)
	Full Name	
	Mailing Address	
	TITLE OR POSITION	▼ CITY ▲ STATE ▲ ZIP CODE ▲
		Telephone Number
9.	Banks or Other Deposite safety deposit boxes or m	les: List all banks or other depositories in which the committee deposits funds, holds accounts, rents ntains funds.
	Name of Bank, Depository, etc.	
	Mailing Address	
		1
_		CITY ▲ STATE ▲ ZIP CODE ▲

2025 APR -7 AMII: 12

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ATTN: ELECTION REPORTS FEDERAL ELECTION COMMISSION 999 E. STREET NW WASHINGTON DC 20463

FRI - 04 APR 5:00P ** 2DAY **

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PREPARER (4/2023)		DATE PREPARED	
(7/2020)			