**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. Save America Fund One Park Row, 5th Floor ADDRESS (number and street) (Check if address is changed) Providence 02903 RΙ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address egalvin@galvinllc.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2024 C00732172 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 Galvin, Edward, , Date 03 01 2024 Signature of Treasurer Galvin, Edward, , , 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

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	YPE OF COMMITTEE:					
C	Candidate Committee:					
(a) This committee is a principal campaign committee. (Complete the candidate information below.)						
(I	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
	Name Candid	1				
	Candid Party /	date Office House Senate Presider	State			
(0	c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate						
,	Party C	This committee is a	mocratic, publican, etc.) Party			
F	Politica	Il Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization						
		Corporation Corporation w/o Capital Stock	Labor Organization			
			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 segregate 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) X	This committee is an independent expenditure-only political committee (Super PAC).				
		In addition, this committee is a Lobbyist/Registrant PAC.				
(I	(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.				
J	oint F	undraising Representative:				
(i	)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate.	•			
(j	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	C .				

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V	/rite or Type Committee Name					
	Save America F	und				
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
	NONE					
	Mailing Address					
		CITY ▲ STATE ▲	ZIP CODE ▲			
	Relationship: Connected	Organization	Leadership PAC Sponso			
			_			
<u>.</u>	Custodian of Records: Ident books and records.	tify by name, address (phone number optional) and position of the person in poss	ession of committee			
	Galvin, Ed	ward				
	Full Name					
	Mailing Address	One Park Row, 5th Floor				
		Providence RI 0296	03			
		CITY ▲ STATE ▲	ZIP CODE ▲			
	Title or Position ▼	CITY	ZIP CODE A			
	Treasurer					
}.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	e name and address of			
	Full Name Galvin, Ed	ward, , ,				
	of Treasurer	One Park Row, 5th Floor				
	Mailing Address					
		Providence RI 0290	03			
		CITY ▲ STATE ▲	ZIP CODE ▲			
	Title or Position ▼					
	Treasurer	Telephone number				

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Full Name of Designated Agent								
Mailing Address								
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲					
		ephone number	]					
	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.							
Name of Bank, Dep	Name of Bank, Depository, etc.							
LE	Bank of America							
Mailing Address	100 Westminster Street							
	Suite 1050							
	Providence	RI 0	2903					
	CITY A	STATE ▲	ZIP CODE ▲					
Name of Bank, Depository, etc.								
L								
Mailing Address								
	CITY A	STATE ▲	ZIP CODE ▲					