FEC

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. SHP Victory Fund PO Box 33079 ADDRESS (number and street) (Check if address is changed) Washington 20033 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address compliance@katzcompliance.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00772624 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 Femia, Nicholas, R, Femia, Nicholas, R., Date 02 13 2024 Signature of Treasurer 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 Only

Local 202-694-1100

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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. (Complet information below.)	e the candidate				
Name of Candidate					
Candidate Party Affiliation Office Sought: House Senate President	State				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate					
(d) This committee is a (National, State or subordinate) committee of the Republic	cratic, can, etc.) Party				
Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a:				
Corporation Corporation w/o Capital Stock Labo	or Organization				
Membership Organization Trade Association Coo	perative				
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 procommittee. (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 political 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. Scott Peters for Congress C C005031	10				
Supporting House Problem Solvers - SHP PAC	:01				

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W	rite or Type Committee Name				
	SHP Victory Fun	d			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponso				
	NONE				
	Mailing Address				
			1		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representat	tive Leadership PAC Sponso		
7.	Custodian of Records: Identification books and records.	fy by name, address (phone number optional) and position of the person	in possession of committee		
	Tinsmon, C	assie			
	Full Name				
	Mailing Address	PO Box 33079			
		Washington	20033		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Custodian of Record	Telephone number	202 - 548 - 0880		
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of		
	Full Name Femia, Nicl	nolas, R, ,			
	of Treasurer	4040 4411 01 NNM			
	Mailing Address	4816 44th St NW			
		Washington	20016		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	202 - 548 - 0880		

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Full Name of Designated Agent							
Mailing Address							
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲				
		Telephone number					
Banks or Other Depositori safety deposit boxes or main	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, Depository,	Name of Bank, Depository, etc.						
Amalga	mated Bank						
Mailing Address	1825 K St						
	Washington	DC	20006				
	CITY ▲	STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY ▲	STATE ▲	ZIP CODE ▲				