Only

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FEC FORM 1		ORGANIZATION					Office Use Only							
1. NAME OF COMMITTEE (ir	n full)		heck if name changed)		ole:If typing, ty he lines.	ре	12F	E4M5]			_
Flip Forwar	d PAC													
	1 1 1 1		1 1 1 1 1				1 1		1 1	1 1	1 1	1 1	1 1	_
ADDRESS (number a	nd etroot)	PO Box 30	01											ı
(Check if a	address	24307 Ma	gic Mountain Pkw	y										1
is changed	d)	Valencia				. 1	CĄ	1	9135	55				ı
		CIT	YA				STATE				ZIP C	CODE		J
COMMITTEE'S E-MA	AIL ADDRE	SS												
☐ ◀ (Check if address is changed)		Christy	@ChristyforCo	ongress.o	rg		1 1					1 1	1 1	
io oriangot	<i>-</i> /	Optional S	second E-Mail A	ddress										
COMMITTEE'S WEB (Check if a is changed	address	,	L) v.christyforcongre	ess.org/										
2. DATE 0			2023											
3. FEC IDENTIFIC	CATION N	JMBER ▶	C	C00725101										
4. IS THIS STATEM	MENT	NEW (N) OR	×	AMENDED	(A)								
certify that I have e	examined th	nis Statemen	t and to the bes	st of my kn	owledge and be	elief it is	s true,	correct	t and	compl	ete.			
Type or Print Name	of Treasure	r Valencia,	Ryan, , ,											_
Signature of Treasure	er <i>Valen</i> ——	cia, Ryan, , ,		[H	Electronically File	e <u>d]</u> [Date	06	M /	13	7	202	23]
NOTE: Submission of	false, erron		mplete information							enaltie	 es of 5	2 U.S.0	 C. §301	09.
Office Use				F	or further informated and Election Colon Free 800-424-9	ommission			Ī		FOI sed 06	RM 1 5/2012)		_

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. (Comple information below.)	ete the candidate					
Name of Candidate						
Candidate Office Party Affiliation Sought: House Senate President	State					
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Biolifet					
Name of Candidate						
Party Committee:						
(d) This committee is a (National, State or subordinate) committee of the Repub	cratic, lican, etc.) Party					
Political Action Committee (PAC):						
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a:					
Corporation Corporation w/o Capital Stock Lab	oor Organization					
Membership Organization Trade Association Cod	operative					
In addition, this committee is a Lobbyist/Registrant PAC.						
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund 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 (Hybridian Committee)	rid PAC).					
In addition, this committee is a Lobbyist/Registrant PAC.						
Joint Fundraising Representative:						
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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						
1C						

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٧	Vrite or Type Committee Name	·	
	Flip Forward P	AC	
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Represent	ative, or Leadership PAC Sponsor
	Mailing Address		
			. -
		CITY ▲ STAT	TE ▲ ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Repr	resentative Leadership PAC Sponso
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the p	person in possession of committee
	Valencia, R	yan, , ,	
	Full Name		
	Mailing Address	PO Box 301	
		24307 Magic Mountain Pkwy	
		Valencia	91355
		CITY ▲ STAT	TE ▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	805 - 587 - 6277
8.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the compassistant treasurer).	mittee; and the name and address of
	Full Name Valencia, F	yan, , ,	
	of Treasurer		
	Mailing Address	PO Box 301	
		24307 Magic Mountain Pkwy	
		Valencia C.	A 91355
	Title or Position -	CITY ▲ STAT	TE ▲ ZIP CODE ▲
	Title or Position ▼		005 507 507
	Treasurer	Telephone number	805 - 587 - 6277

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Full	Name of signated			
Age				
Mai	ling Address			
Title	e or Position •	CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone	number	
		Depositories: List all banks or other depositories in which the comes or maintains funds.	mittee deposits f	unds, holds accounts, rents
Nam	ne of Bank, D	epository, etc.		
		Amalgamated Bank		
Mail	ling Address	1825 K St NW		
		Washington	DC DC	20006
		CITY ▲	STATE ▲	ZIP CODE ▲
Nam	ne of Bank, D	epository, etc.		
Mail	ing Address			
		CITY ▲	STATE ▲	ZIP CODE ▲