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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. The Code Blue Project 9792 Martingham Circle ADDRESS (number and street) Unit 12 (Check if address is changed) St. Michaels 21663 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS pamb@thecodeblueproject.com (Check if address is changed) Optional Second E-Mail Address davidk@thecodeblueproject.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.patriotsforchange2020.com (Check if address is changed) DATE 2021 C00748681 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT 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. Bernstein, Pamela, , Ms, Type or Print Name of Treasurer Bernstein, Pamela, , Ms, [Electronically Filed] 03 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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

FEC Fo	orm 1 (Revised 02/2009) Page 2
TYPE OF C	COMMITTEE e 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 candidate information below.)
Name of Candidate	
Candidate Party Affiliation	Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Com	nmittee: (National, State (Democratic,
(d)	This committee is a committee of the committee of the committee of the committee is a committee of the commi
Political A	action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or par 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.)
Joint Fund	draising Representative:
(g)	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.
(b)	
(h)	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.
ш	
ш	committees/organizations, none of which is an authorized committee of a federal candidate.
	committees/organizations, none of which is an authorized committee of a federal candidate. mittees Participating in Joint Fundraiser
Com	committees/organizations, none of which is an authorized committee of a federal candidate. Implication in Joint Fundraiser

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Write or Type Committee Na		<u> </u>
The Code Blue	e Proiect	
	d Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	eted Organization Affiliated Committee Joint Fundraising Represent	tative Leadership PAC Sponso
. Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of the	person in possession of committee
	in, Pamela, , Ms.,	
- I I I I I I I I I I I I I I I I I I I	9792 Martingham Circle	
Mailing Address	Unit 12	
	St. Michaels	21663
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	202 412 - 4307
3. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee assistant treasurer).	e; and the name and address of
Full Name Bernster of Treasurer	in, Pamela, , Ms,	
Mailing Address	9792 Martingham Circle	
	Unit 12	
	St. Michaels	21663
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	202 - 412 - 4307

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Full Name of Designated	Kennedy, Audrey, , ,	I
Agent	6701 Capistrano Ave.	
Mailing Address		
	West Hills CA 91307	,
	CITY STATE	ZIP CODE
Title or Position Agent		378 8682
	Depositories: List all banks or other depositories in which the committee deposits funds, houses or maintains funds. Depository, etc.	
	Capital Bank	
Mailing Address	10700 Parkridge Blvd.	
Ç	Suite 180	
	Reston VA 20191	
	CITY STATE	ZIP CODE
Name of Bank, D	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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5(g)	or(h). Joint Fundraising	g Participant:		
,,,,	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	С
	4.			0
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
	Mailing Address			
		1		
			1 1 . 1	1
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee Joint	Fundraising Representa	
8.		by name, address (phone number - optional)		
8.	Designated Agent: Identify Katzner, [Full Name			
8.	Katzner, [
8.	Katzner, [Full Name	Daniel, , ,		
8.	Katzner, [Full Name	Daniel, , , 921 President Street	NY .	. 11215
8.	Katzner, [Full Name	Daniel, , , 921 President Street Brooklyn		11215
8.	Katzner, [Full Name	Paniel, , , 921 President Street Brooklyn	NY STATE A	11215 ZIP CODE A
8.	Katzner, [Full Name	Paniel, , , 921 President Street Brooklyn CITY	STATE ▲	
8.	Katzner, [Full Name	Paniel, , , 921 President Street Brooklyn CITY	STATE A	ZIP CODE ▲
	Full Name	Paniel, , , 921 President Street Brooklyn CITY Teles: List all banks or other depositories in which	STATE A	ZIP CODE ▲ 917 - 922 - 0808
	Full Name Mailing Address TITLE OR POSITION Agent Agent Banks or Other Depositor safety deposit boxes or ma	Paniel, , , 921 President Street Brooklyn CITY Teles: List all banks or other depositories in which	STATE A	ZIP CODE ▲ 917 - 922 - 0808
	Full Name	Paniel, , , 921 President Street Brooklyn CITY Teles: List all banks or other depositories in which	STATE A	ZIP CODE ▲ 917 - 922 - 0808
9.	Full Name Mailing Address TITLE OR POSITION Agent Banks or Other Depositor safety deposit boxes or ma Name of Bank,	Paniel, , , 921 President Street Brooklyn CITY Teles: List all banks or other depositories in which	STATE A	ZIP CODE ▲ 917 - 922 - 0808
	Full Name Mailing Address TITLE OR POSITION Agent Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	Paniel, , , 921 President Street Brooklyn CITY Teles: List all banks or other depositories in which	STATE A	ZIP CODE ▲ 917 - 922 - 0808
	Full Name Mailing Address TITLE OR POSITION Agent Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	Paniel, , , 921 President Street Brooklyn CITY Teles: List all banks or other depositories in which	STATE A	ZIP CODE ▲ 917 - 922 - 0808

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

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h). Joint Fundraising	Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected O	rganization, Affiliated Committee, Joint Fu	Indraising Representativ	e, or Leadership PAC Spon
	<u> </u>		· · · · · · · · · · · · · · · · · · ·
Mailing Address	<u> </u>		
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected 0	Organization Affiliated Committee Oy name, address (phone number – optional	loint Fundraising Represent	ative Leadership PAC Sp
	oy name, address (phone number – optional David, , ,		Leadersnip PAC Sp
esignated Agent: Identify I	oy name, address (phone number – optional David, , , 9792 Martingham Circle		Leadersnip PAC Sp
esignated Agent: Identify to Bernstein, Full Name	oy name, address (phone number – optional David, , ,		ative Leadership PAC Sp
esignated Agent: Identify to Bernstein, Full Name	oy name, address (phone number – optional David, , , 9792 Martingham Circle		Leadersnip PAC Sp
esignated Agent: Identify Bernstein, I Full Name Mailing Address	oy name, address (phone number – optional David, , , , 9792 Martingham Circle Unit 12 St. Michaels		
esignated Agent: Identify to Bernstein, Full Name	oy name, address (phone number – optional David, , , , 9792 Martingham Circle Unit 12 St. Michaels) 	21663
esignated Agent: Identify the Bernstein, In Full Name In Inc. In Inc. Identify the Bernstein, Inc. Inc. Inc. Inc. Inc. Inc. Inc. Inc.	oy name, address (phone number – optional David, , , 9792 Martingham Circle Unit 12 St. Michaels CITY es: List all banks or other depositories in wh	MD STATE ▲ Telephone Number	21663 ZIP CODE ▲ 703 - 798 - 871
esignated Agent: Identify In Bernstein, In B	oy name, address (phone number – optional David, , , 9792 Martingham Circle Unit 12 St. Michaels CITY es: List all banks or other depositories in wh	MD STATE ▲ Telephone Number	21663 ZIP CODE ▲ 703 - 798 - 871
esignated Agent: Identify Bernstein, Full Name	oy name, address (phone number – optional David, , , 9792 Martingham Circle Unit 12 St. Michaels CITY es: List all banks or other depositories in wh	MD STATE ▲ Telephone Number	21663 ZIP CODE ▲ 703 - 798 - 871
esignated Agent: Identify Bernstein, Full Name	oy name, address (phone number – optional David, , , 9792 Martingham Circle Unit 12 St. Michaels CITY es: List all banks or other depositories in wh	MD STATE ▲ Telephone Number	21663 ZIP CODE ▲ 703 - 798 - 871