**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. America's Physician Groups PAC 611 N Brand Blvd ADDRESS (number and street) **Suite 1300** (Check if address is changed) Glendale 91203-3213 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address jcallahan@apg.org is changed) Optional Second E-Mail Address outsourcing@aristotle.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.APGadvocates.org (Check if address is changed) DATE 2024 C00461756 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. Type or Print Name of Treasurer Callahan, Jenifer, , 07 2024 Signature of Treasurer Callahan, Jenifer, , , Date 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

FEC Form 1 (Revised 03/2022)	Page <b>2</b>			
TYPE OF COMMITTEE:				
Candidate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate information be	low.)			
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 Pres	State sident District			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee				
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party			
Political Action Committee (PAC):				
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.)	Its connected organization is a:			
Corporation W/o Capital Stock	Labor Organization			
Membership Organization Trade Association	Cooperative			
In addition, this committee is a Lobbyist/Registrant PAC.				
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separat committee. (i.e., nonconnected committee)	e segregated 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 (Hybrid PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.				
Joint Fundraising Representative:				
(i) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, at least one of which is an authorized committee of a federal call	·			
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				
2.				

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٧	Vrite or Type Committee Name				
	•	cian Groups PAC			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	America's Physician	Groups			
	Mailing Address	611 N Brand Blvd			
	Ü	Suite 1300			
		Glendale	CA	91203-3213	
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Relationship: X Connected	Organization Affiliated Organization	Joint Fundraising Representative	Leadership PAC Sponso	
			3		
— 7.	Custodian of Records: Identi	fy by name, address (phone number option	al) and position of the person in a	possession of committee	
	books and records.	, , ,	.,		
	Callahan, J	enifer, , ,			
	Full Name				
	Mailing Address	611 N Brand Blvd			
		Suite 1300			
		Glendale	CA	91203-3213	
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼	OHY A	STATE	ZIP CODE A	
	Custodian of Records		Telephone number 703	3027	
8.	<b>Treasurer:</b> List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).				
	Full Name Callahan, J	onifor			
	Full Name Callahan, J of Treasurer	eillei, , ,			
	Mailing Address	611 N Brand Blvd			
		Suite 1300			
		Glendale	CA CA	91203-3213	
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼	<b>5.1.1</b> =			
	Treasurer		Telephone number 703	3027	

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Full Name of Designated Agent	Ashenfelter, Brittany, , ,				
Mailing Address	205 Pennsylvania Ave SE				
	Washington DC	20003-1164			
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲			
Assistant Treasu					
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, etc.					
	Merrill Lynch				
Mailing Address	100 Spectrum Center Drive				
	Suite 1100				
	Irvine CA	92618			
	CITY ▲ STATE ▲	ZIP CODE ▲			
Name of Bank, D	Depository, etc.				
Mailing Address					
	CITY ▲ STATE ▲	ZIP CODE ▲			

## : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This amendment is to update the committee Treasurer, Custodian of Records, address, and email.

Form/Schedule: Transaction ID: