



FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED  
FEC MAILCENTER

2022-AUG 29 AM 11:47

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

PRIDE PAC

ADDRESS (number and street) 425 S. Clementine St.

(Check if address is changed) #116

Anaheim CA 92805  
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) info@pridepac.org

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) http://www.pridepac.org

2. DATE 08 / 27 / 2022

3. FEC IDENTIFICATION NUMBER C 00513150

4. 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 Marcus Lovingood

Signature of Treasurer *M. Lovingood*

Date 08 / 27 / 2022

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.

Table with 5 columns for Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 03/2022)

NONPROFIT CORPORATION

5. 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. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State

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)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation  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 separate segregated fund or party 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)  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 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. \_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2025 RELEASE UNDER E.O. 14176

Write or Type Committee Name

PRIDE PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

[Empty address fields]

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:  Connected Organization  Affiliated Organization  Joint Fundraising Representative  Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Michael Bracco

Mailing Address

425 S. Clementine St.

#116

Anaheim

CA

92805

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Chairman

Telephone number

[Empty phone number fields]

8. Treasurer: 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 of Treasurer

Marcus Lovingood

Mailing Address

425 S. Clementine St.

#116

Anaheim

CA

92805

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

President & Treasurer

Telephone number

923-553-0611

NONDISCRIMINATION NOTICE

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address]

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

9. 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.

Wells Fargo Bank [Grid]

Mailing Address

1000 Fair Oaks Ave [Grid]

South Pasadena [Grid] CA [Grid] 91030 [Grid]

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address]

CITY ▲

STATE ▲

ZIP CODE ▲

NON-PROFIT ORGANIZATION

1-800-450-9777

PRESS FIRMLY TO SEAL



PRESS FIRMLY



1007



20463

U.S. POSTAGE PAID  
Permit No. 100  
LOS ANGELES, CA  
90032  
AUG 26, 22

**\$30.20**  
AMOUNT

R2304M113921

-05

FOR DOMESTIC AND INTERNATIONAL USE

**EXPRESS®**

**FLAT RATE  
ENVELOPE**

ONE RATE ■ ANY WEIGHT

To schedule free Package Pickup,  
scan the QR code.



USPS.COM/PICKUP



**UNITED STATES  
POSTAL SERVICE®** | **PRIORITY  
MAIL  
EXPRESS®**

CUSTOMER USE ONLY  
FROM: (PLEASE PRINT)

PHONE ( )

LOVINGOOD  
4225 VIA ARSOLADA #538  
LOS ANGELES, CA 90042

DELIVERY OPTIONS (Customer Use Only)

SIGNATURE REQUIRED (Note: The meter must check the "Signature Required" box if the mailer: 1) requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Places Return Receipt equipment in the box. If not checked, the Postal Service will leave the item in the addressee's mailbox or at the addressee's location without attempting to obtain the addressee's signature or delivery.

No Saturday Delivery (delivered next business day)  
 Sunday/Holiday Delivery Required (additional fee, where available)  
\*Refer to USPS.com® or local Post Office® for availability.

TO: (PLEASE PRINT)

PHONE ( )

FEDERAL ELECTION COMMISSION  
1058 FIRST STREET, NE  
WASHINGTON, DC  
205463

ZIP + 4® (U.S. ADDRESSES ONLY)

■ For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.  
■ \$100.00 Insurance Included.



EI 078 645 936 US

ORIGIN (POSTAL SERVICE USE ONLY)

PO ZIP Code 90032	Scheduled Delivery Date (MM/DD/YYYY) 8-27-22	<input checked="" type="checkbox"/> 1-Day <input type="checkbox"/> 2-Day	Postage \$ 26.95	<input type="checkbox"/> Military
Date Accepted (MM/DD/YYYY) 8-26-22	Scheduled Delivery Time 8:00 PM	Insurance Fee \$	COD Fee \$	
Time Accepted 1205 AM		Return Receipt Fee \$ 3.25	Live Animal Transportatio \$	
Special Handling/Fragile	Sunday/Holiday Premium Fee \$	Total Postage & Fees \$ 30.20		
Weight lbs. oz. 2 oz.	Acceptance Employee Initials TIV	DELIVERY (POSTAL SERVICE USE ONLY)		
Delivery Attempt (MM/DD/YYYY) Time		Employee Signature		
Delivery Attempt (MM/DD/YYYY) Time		Employee Signature		

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked <b>8/26/22</b>
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

**WDO**  
 PREPARER  
 (3/2015)

**8/29/22**  
 DATE PREPARED

NONCONFIDENTIAL