10/21/2025 09:12

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. Ohio Democratic Party - Federal PO Box 130 ADDRESS (number and street) Suite 101 (Check if address is changed) Columbus 43216 OH CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address admin@leftfieldcompliance.com is changed) Optional Second E-Mail Address compliance@ohiodems.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00016899 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 Frost Brooks, Patricia,, Date 10 21 2025 Signature of Treasurer Frost Brooks, Patricia, , , 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

FE	C Form 1 (Revised 03/2022)	Page 2
	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 information below.)	e candidate
	Name of Candidate	
	Candidate Office Party Affiliation 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) X This committee is a STA (National, State or subordinate) committee of the DEM (Democratic Republican,	
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	Corporation Corporation w/o Capital Stock Labor Or	rganization
	Membership Organization Trade Association Cooperation	
	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 committee. (i.e., nonconnected committee)	d 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 PA	C).
	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1 C	

I	FEC Form 1 (Revised (02/2009)	Page 3
٧	Vrite or Type Committee Name		
6.	Ohio Democratio	rganization, Affiliated Committee, Joint Fundraising Repre	econtative or Leadership BAC Spencer
0.	DNC/State Party Vic		sentative, or Leadership FAC Sponsor
	Divorciate i arty vio		
	Mailing Address	430 S Capitol St SE	
		1	
		Washington	DC 20003
		CITY ▲	STATE ▲ ZIP CODE ▲
	Deletionalis. Commented		
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising	Representative Leadership PAC Sponso
	Custodian of Records: Ident	ify by name, address (phone number optional) and position o	of the person in possession of committee
	books and records.		
	Ross, Sara	ι h , , ,	
	Full Name		
	Mailing Address	697 E Broad St	
		Suite 101	
		Columbus	OH 43215
		077/	TID CODE A
	Title or Position ▼	CITY A	STATE ▲ ZIP CODE ▲
	Custodian	1	
		Telephone num	ıber
8.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the assistant treasurer).	committee; and the name and address of
	Full Name Frost Broo	ks, Patricia, , ,	
	of Treasurer		
	Mailing Address	697 E Broad St	
		Suite 101	
		Columbus	OH 43215
		CITY ▲	STATE ▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer		nber 614 - 233 - 1138

FEC F	form 1 (Revised 02/2009)	Page 4
Full Name Designated Agent		
Mailing Add	dress	
	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Pos	sition ▼ Telephone number	
. Banks or 0 safety depo	Other Depositories: List all banks or other depositories in which the committee deposits funds, osit boxes or maintains funds.	holds accounts, rents
Name of B	ank, Depository, etc.	
	Huntington Bank	
Mailing Add	17 S High St	
	Columbus OH 43	215
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of B	ank, Depository, etc.	
	Amalgamated Bank	
Mailing Add	dress 1825 K ST NW	
	Washington DC 200	006
	CITY ▲ STATE ▲	ZIP CODE ▲

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
		FEC ID number	С
4.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
Democratic Grassroo	ots Victory Fund		
Mailing Address	400 S Capital St SE		
	Washington	l DC l	20003
		STATE A	ZIP CODE ▲
Relationship:	CITY A		ZII OODL =
	CITY d Organization	Fundraising Represent	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee X Joint		ative Leadership PAC Sp
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint		ative Leadership PAC Sp
Connecte Designated Agent: Identification Full Name Mailing Address	Affiliated Committee X Joint by by name, address (phone number – optional)		ative Leadership PAC Spanish
Connecte Designated Agent: Identif	Affiliated Committee X Joint by by name, address (phone number – optional) CITY	Fundraising Representation	

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Func	draising Representative	or Leadershin PAC Snon
Ohio Grassroots Vic			, or zeaderomp rae open
Mailing Address	600 Pennsylvania Ave SE		
	#15180 		
	Washington	DC	20003
	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join		Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Join		Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Join		Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	
esignated Agent: Identi	Affiliated Committee X Join fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional) CITY	nt Fundraising Representa	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or maname of Bank, epository, etc.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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h). Joint Fundraisin	,		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected Harris Victory Fund	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
<u> </u>			
Mailing Address	430 S Capitol St SE		
ivialility Address			
	Washington	DC	20003
Relationship:	CITY A	STATE A	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify	Organization Affiliated Committee X Join by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify Full Name		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify Full Name		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional)	t Fundraising Represent	ZIP CODE A
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY To	STATE A elephone Number the committee deposit	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY To ies: List all banks or other depositories in which ntains funds.	STATE A elephone Number the committee deposit	ZIP CODE A ts funds, holds accounts, rent

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

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h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spon
Landsman Victory F	und		
Mailing Address	P.O. Box 413		
	Cincinnati	OH	45201
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
		oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identi	fy by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number	ZIP CODE A
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(h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spons
Sykes Victory Fund			
Mailing Address	122 C St NW		
	Ste 360		
	Washington	DC	20001
Relationship:	OITV A	STATE ▲	ZIP CODE ▲
Connecte	CITY ▲ d Organization	Joint Fundraising Represent	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee X	Joint Fundraising Represent	ative Leadership PAC Spo
Connected Connected Pesignated Agent: Identif	d Organization Affiliated Committee X	Joint Fundraising Represent	ative Leadership PAC Spo
connecte resignated Agent: Identif	d Organization Affiliated Committee X	Joint Fundraising Represent	ative Leadership PAC Spo
connecte resignated Agent: Identif	d Organization Affiliated Committee X	Joint Fundraising Represent	ative Leadership PAC Spo
connecte resignated Agent: Identif	d Organization Affiliated Committee X y by name, address (phone number – optional	Joint Fundraising Represent	ative Leadership PAC Spo
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1	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
-	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
MARCY KAPTUR VIO	STORY FUND		
Mailing Address	545 E TOWN ST		
Relationship:	Columbus CITY	OH STATE ▲	43215 ZIP CODE ▲
		Fundraising Representa	
esignated Agent: Identify	by name, address (phone number - optional)		
esignated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY CITY Te	lephone Number	
Full Name Mailing Address TITLE OR POSITION Lanks or Other Depositor afety deposit boxes or mail lame of Bank, depository, etc.	CITY CITY Te	the committee deposit	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION Fanks or Other Depositor deposit boxes or mail	CITY CITY Te ries: List all banks or other depositories in which aintains funds.	the committee deposit	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION Lanks or Other Depositor afety deposit boxes or mail lame of Bank, depository, etc.	CITY CITY Te ries: List all banks or other depositories in which aintains funds.	the committee deposit	s funds, holds accounts, rent

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

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h). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected OHIO VICTORY FU	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
	1 2024		
Mailing Address	600 PENNSYLVANIA AVE SE		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	Affiliated Committee X Jointy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	d Companies the Mellisted Committee Leint For	ducinia a Dominia adalah	a and and analysis DAO Consu
Ohio Grassroots Vid	d Organization, Affiliated Committee, Joint Functory 2026	duraising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 130		
	Columbus	OH	43216
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joseph Josep	int Fundraising Representa	Leadership PAC Sp
		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Representa	Leadersnip PAC Sp
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h). Joint Fundraisir	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Ohio Grassroots Vict	Organization, Affiliated Committee, Joint Fuory Fund	ndraising Hepresentativ	e, or Leadership PAC Spons
Mailing Address	605 N High St Num 320		
	Columbus	OH	43215
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte		oint Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee X J		ative Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3		FEC ID number	C
4.		FEC ID number	C
laws of Amy Commodes	L Communication Affiliated Community of Laint E	dusisina Baurraantat	ing on Londonskin DAO Conne
Wyden Fund for a S	I Organization, Affiliated Committee, Joint Fenate Majority 2026	undraising Representat	ive, or Leadership PAC Spons
Mailing Address	600 Pennsylvania Ave Se #15180		
	Washington	DC DC	20003
Relationship:	CITY ▲	STATE	▲ ZIP CODE ▲
	Affiliated Committee X fy by name, address (phone number – optional	Joint Fundraising Represe	ntative Leadership PAC Spo
			ntative Leadership PAC Spo
Designated Agent: Identi			ntative Leadership PAC Spo
Pesignated Agent: Identi			ntative Leadership PAC Spo
Pesignated Agent: Identi			ntative Leadership PAC Spo
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Pesignated Agent: Identi Full Name L Mailing Address	fy by name, address (phone number – optiona		
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Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional content of the conten	STATE A Telephone Number	ZIP CODE A