Only

## STATEMENT OF

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**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. OC HATES THE USA 611 PENNSYLVANIA AVE. SE ADDRESS (number and street) #329 (Check if address is changed) WASHINGTON 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS REDMOTIVEDC@GMAIL.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00711044 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. CLEMENS, DAVID, , , Type or Print Name of Treasurer CLEMENS, DAVID, , , [Electronically Filed] 07 19 2019 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

Local 202-694-1100

| FE                | EC For     | m 1 (Revised 02/2009)  | Page 2                                |
|-------------------|------------|--|---------------------------------------|
|                   |            | DMMITTEE  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. (Compinformation below.)   | lete the candidate                    |
| Name<br>Candid    |            |  | <u> </u>                              |
| Candid<br>Party A |            | Office Sought: House Senate President  | State                                 |
| (c)               | ×          | This committee supports/opposes only one candidate, and is NOT an authorized committee.  |                                       |
| Name<br>Candid    |            | Ocasio-Cortez, Alexandria, , ,   |                                       |
| Party             | Com        | mittee:  |                                       |
| (d)               |            | · · · · · · · · · · · · · · · · · · ·  | Democratic,<br>epublican, etc.) Party |
| Politic           | cal A      | ction Committee (PAC):   |                                       |
| (e)               |            | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn  | ected 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)               |            | This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)   | regated fund or part                  |
|                   |            | In addition, this committee is a Lobbyist/Registrant PAC.  |                                       |
|                   |            | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)   |                                       |
|                   | <b>.</b> . |  |                                       |
|                   | rund       | raising Representative:  | or more maliking                      |
| (g)               | Ш          | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate. | or more political                     |
| (h)               |            | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.         | or more political                     |
|                   | Comr       | nittees Participating in Joint Fundraiser  |                                       |
|                   | 1.         | FEC ID number  |                                       |
|                   | 2.         | FEC ID number  |                                       |
|                   | 3.         | FEC ID number C  |                                       |
|                   | 4.         |  |                                       |

| FEC Form 1 (Revised   | 02/2009)  | Page <b>3</b>                  |
|---|---|--------------------------------|
| Write or Type Committee Nam                                       |   | Tage <b>3</b>                  |
| AOC HATES T   |   |                                |
|   | Organization, Affiliated Committee, Joint Fundraising Representative, o                       | r Leadership PAC Sponsor       |
| NONE  |   |                                |
|   |   |                                |
|   |   |                                |
| Mailing Address   |   |                                |
|   |   |                                |
|   | CITY STATE  | ZIP CODE                       |
| Relationship: Connecte  | ed Organization Affiliated Committee Joint Fundraising Representative                         | ve Leadership PAC Sponsor      |
| Custodian of Records: Ide books and records.                      | entify by name, address (phone number optional) and position of the per-                      | son in possession of committee |
|   | S, DAVID, , ,   |                                |
| Full Name Mailing Address   | 611 PENNSYLVANIA AVE. SE  |                                |
| <b>3</b>  | #329  |                                |
|   | WASHINGTON  | 20003                          |
| Title or Position   | CITY STATE  | ZIP CODE                       |
| TREASURER   | Telephone number  | 2 599 2959                     |
| 3. <b>Treasurer:</b> List the name ar any designated agent (e.g., | nd address (phone number optional) of the treasurer of the committee; a assistant treasurer). | and the name and address of    |
| Full Name CLEMENS of Treasurer                                    | S, DAVID, , ,   |                                |
| Mailing Address   | 611 PENNSYLVANIA AVE. SE  |                                |
|   | #329  |                                |
|   | WASHINGTON  | 20003                          |
| Title or Position   | CITY STATE  | ZIP CODE                       |
| TREASURER   |   | 2 599 2959                     |

| FEC FOR  | <b>n 1</b> (Pavisad 0.2/2000)   | Dogo A                            |
|--|---|-----------------------------------|
|  | <b>n 1</b> (Revised 02/2009)  | Page <b>4</b>                     |
| Full Name of<br>Designated<br>Agent                    |   |                                   |
| Mailing Address  |   |                                   |
|  |   |                                   |
|  |   |                                   |
|  | CITY STATE  | ZIP CODE                          |
| Title or Position                                      | Telephone number  |                                   |
| Banks or Other<br>safety deposit be<br>Name of Bank, I | Depositories: List all banks or other depositories in which the committee depository or maintains funds.  Depository, etc.    CHAIN BRIDGE BANK | sits funds, holds accounts, rents |
| Mailing Address  | 1445A LAUGHLIN  |                                   |
| Mailing Address  | STE 101   |                                   |
|  |   |                                   |
|  | MCLEAN  | 22101                             |
|  | MCLEAN VA CITY STATE  |                                   |
| Name of Bank, I  | CITY STATE  |                                   |
| Name of Bank, I  | CITY STATE  | ZIP CODE                          |
| Name of Bank, I  | CITY STATE  Depository, etc.  | ZIP CODE                          |
|  | CITY STATE  Depository, etc.  | ZIP CODE                          |
|  | CITY STATE  Depository, etc.  | ZIP CODE                          |

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1A
Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: