FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Colin Allred for Senate PO Box 601631 ADDRESS (number and street) (Check if address is changed) Dallas 75360 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address allred@mbacg.com is changed) Optional Second E-Mail Address smele@mbacg.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://colinallred.com/ (Check if address is changed) DATE 2024 C00839597 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 Mele, Steven,, Date 06 23 2024 Signature of Treasurer Mele, Steven, , , 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

E	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 Allred, Colin, , ,	
	Candidate Party Affiliation Office Sought: House X Senate President	State TX 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 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 Cooperate	tive
	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)	I 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	

I	FEC Form 1 (Revised 0	2/2009)			Page 3
٧	Vrite or Type Committee Name	·			-
	Colin Allred for S	Senate			
6.	Name of Any Connected Or	rganization, Affiliated Committee, Join	t Fundraising Representa	tive, or Leade	ership PAC Sponsor
	Gallego Allred Victory	y Fund			
	Mailing Address	611 Pennsylvania Ave SE			
		#143			
		Washington	, DC	20003	3 1
		CITY A	STATE		ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	X Joint Fundraising Repre	sentative	Leadership PAC Spons
7.	Custodian of Records: Identi	ify by name, address (phone number op	otional) and position of the po	erson in posse	ssion of committee
	books and records.				
	Mele, Steve	∍n, , ,			
	Full Name				
	Mailing Address	611 Pennsylvania Ave SE			
		#143			
		Washington	DC	20003	3 1
	Title or Position ▼	CITY A	STATE	▲	ZIP CODE ▲
	Treasurer			ı 202 ı ı	552 0221
	i i easurei		Telephone number	-	- 0221
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of assistant treasurer).	f the treasurer of the comm	ittee; and the	name and address of
	Full Name Mele, Steve	en, , ,			
	of Treasurer	044 Paragraphy 25			
	Mailing Address	611 Pennsylvania Ave SE			
		#143	<u> </u>		<u> </u>
		Washington	DC	20003	
		OITV A	OTATE		71D 00DE A
	Title or Position ▼	CITY ▲	STATE		ZIP CODE ▲
	Treasurer		Talanteere	202 _	552 0221
			Telephone number		

	FEC Form 1	(Revised 02/2009)	Page 4	_
De Ag	II Name of signated ent ailing Address	Lee, Lauren, Decot, , 611 Pennsylvania Ave SE #143		
		Washington	DC 20003 -	_
Titl	le or Position ▼	CITY ▲	STATE ▲ ZIP CODE ▲	
	ssistant Treasur	or .	one number 202 - 552 - 0221	_
		Depositories: List all banks or other depositories in which the coles or maintains funds.	ommittee deposits funds, holds accounts, rents	
Nai	me of Bank, D	epository, etc.		
		Amalgamated Bank		
Ма	iling Address	1		
		Washington	DC 20006	
		CITY ▲	STATE ▲ ZIP CODE ▲	
Nai	me of Bank, D	epository, etc.		_
		Woodsboro Bank		
Ма	iling Address	PO Box 36		
		Woodsboro	MD 21798	
		CITY ▲	STATE ▲ ZIP CODE ▲	

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

Page ____ **of** ____

(h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Colin Allred Victory F	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	611 Pennsylvania Ave SE		
	#143		
	Washington	DC	20003
		STATE ▲	ZIP CODE ▲
	CITY ▲ d Organization	oint Fundraising Represent	
esignated Agent: Identif	d Organization Affiliated Committee X J	oint Fundraising Represent	
Connecte esignated Agent: Identif	d Organization Affiliated Committee X J	oint Fundraising Represent	
esignated Agent: Identif	d Organization Affiliated Committee X J	oint Fundraising Represent	
esignated Agent: Identif	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	pint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	
esignated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	pint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	d Organization Affiliated Committee X Journally by name, address (phone number – optional) CITY A pries: List all banks or other depositories in white	STATE A Telephone Number	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail and of Bank, repository, etc.	d Organization Affiliated Committee X Journally by name, address (phone number – optional) CITY A pries: List all banks or other depositories in white	STATE A Telephone Number	Leadership PAC Sp

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representative	e or Leadership PAC Spon
Allred Levin Victory I	_		
Mailing Address	600 Pennsylvania Ave SE		
	Unit 15180		
	Washington	DC	20003
B. Larra and C.	OITV	STATE ▲	ZIP CODE ▲
	CITY ▲ ed Organization	int Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identif	ed Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A

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

Page ____ **of** ____

(h). Joint Fundraisi	ng Participant.			
1.		FEC ID	number	С
2.		FEC ID	number	С
3		FEC ID	number	C
4.		FEC ID	number	C
Serve America Victo	l Organization, Affiliated Committee, Joi	nt Fundraising Rep	resentative	e, or Leadership PAC Spons
Mailing Address	PO Box 2013			
Relationship:	Salem CITY ▲		MA STATE ▲	01970 ZIP CODE ▲
rielationship.	CITY		SIAIE	ZIP CODE A
Designated Agent: Identi	Affiliated Committee fy by name, address (phone number – op	X Joint Fundraising	Representa	ative Leadership PAC Spo
Pesignated Agent: Identi	_		Representa	Leadership PAC Spo
Designated Agent: Identi	_		Representa	Leadership PAC Spo
Pesignated Agent: Identi	_		Representa	Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – op	tional)	Representa	Leadership PAC Spo
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – op	tional)	STATE A	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – op CITY CITY pries: List all banks or other depositories aintains funds.	tional) Telephone No	STATE Aumber Lee deposit	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – op CITY CITY pries: List all banks or other depositories aintains funds.	Telephone No	STATE Aumber Lee deposit	ZIP CODE A

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1.							
				FEC I	D number	С	
2.				FEC I	D number	С	
3.				FEC I	D number	С	
4.	1 1 1 1			FEC I	D number	С	
Vallejo Allre		_	liated Committee, Joint	Fundraising Re	epresentative	e, or Leadersnip PA	Spons
Mailing Ad	ldress	611 Pennsylvani	ia Ave SE				
		#143					
		Washington		, , , , I	DC	20003	-
Relationsh	ip:		CITY ▲		STATE A	ZIP CO	DE 🛦
esignated Age	Connected Cent: Identify b		Affiliated Committee	≺ Joint Fundraisin	ng Representa	Leadership	PAC Sp
esignated Age					ng Representa	Leadership	PAC Sp
	ent: Identify b				ng Representa	Leadership	PAC Sp
Full Name	ent: Identify b				ng Representa	Leadership	PAC Sp
Full Name	ent: Identify b				ng Representa	Leadership	PAC Sp
Full Name Mailing Addr	ent: Identify b	y name, address			STATE A	ZIP COD	

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 numb	er C
2.		FEC ID numb	er C
3.		FEC ID numb	er C
4		FEC ID numb	er C
Name of Any Connected	I Organization, Affiliated Committee, Joint	Fundraising Representa	ative, or Leadership PAC Spons
	,		
Mailing Address	600 Pennsylvania Ave SE		
	#15180		
	Washington	DC DC	20003
Dalatianakin	CITY ▲	STATE	ZIP CODE ▲
		Joint Fundraising Repres	sentative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee		Sentative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee		Sentative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee Affiliated Committee	nal)	
Connecte Designated Agent: Identi Full Name	Affiliated Committee Affiliated Committee		
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee Affiliated Committee	nal)	
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Affiliated Committee Affiliated Committee Affiliated Committee Affiliated Committee	STATE A	ZIP CODE A cosits funds, holds accounts, rents
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Deposite Safety deposit boxes or make the property of the pr	Affiliated Committee Affiliated Committee Affiliated Committee Affiliated Committee Affiliated Committee Affiliated Committee	STATE A Telephone Number	ZIP CODE A cosits funds, holds accounts, rents

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

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d Organization, Affil 24 600 Pennsylvani #15180 Washington ed Organization	ia Ave SE CITY Affiliated Committee			sentative,	20003 ZI	ip PAC Spons
600 Pennsylvani #15180 Washington wed Organization	ia Ave SE CITY Affiliated Committee		FEC ID n	sentative,	or Leadersh	P CODE A
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#15180 Washington ed Organization	CITY ▲ Affiliated Committee	X Joint		L STATE ▲	ZI	
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ed Organization	Affiliated Committee	X Joint		L STATE ▲	ZI	
	Affiliated Committee	X Joint				
		× Joint	Fundraising R	lepresentati	ю П.	
N ▼	CITY A		STA	ATE A	ZIP	CODE A
		Tel	ephone Num	ber		
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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
2024 Green Senate			
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee X July by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number	ZIP CODE A

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h). Joint Fundraisi r	.g . apa		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
2024 Senate Impact	Organization, Affiliated Committee, Joint Fu	ndraising Hepresentativ	e, or Leadership PAC Spons
Mailing Address	600 Pennsylvania Ave SE		
	#15180		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X J y by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
Connecte			ative Leadership PAC Sp
Connecte esignated Agent: Identif			ative Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional)		
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or(h). Joint Fundraisir	ıg Participant:		
1		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representative	, or Leadership PAC Sponsor
Schiff(t) The Senate			
Mailing Address	611 Pennsylvania Ave SE		
ag / taaeee	Suite 143		
	Washington	ı DC ı	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	
Connecte	d Organization Affiliated Committee X Join	it i unuraising riepresenta	tive Leadership PAC Sponso
Full Name			
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	•	STATE ▲ Felephone Number	ZIP CODE ▲
TITLE OR POSITION	•	1	ZIP CODE ▲
	· · · · · · · · · · · · · · · · · · ·	Telephone Number	
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h). Joint Fundraisi	ig i artioipanti		
1.		FEC ID number	С
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-	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
OH TX 2024			
Mailing Address	600 Pennsylvania Ave SE #15180		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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