FEC FORM 1		STATEMEN ORGANIZ			P/ Office Use Only	AGE 1 / 4 ——
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
Paid Leave	PAC					
		1931 Cordova Road				
ADDRESS (number an						
(Check if a is changed		2016				
		Fort Lauderdale CITY ▲		LFL STATE ▲	33316 – ZIP C0	
COMMITTEE'S E-MA	IL ADDRES	S				
(Check if a is changed		yolanda@brownfinanci	alconsultants.com			
	''	Optional Second E-Mail Add	dress ncialconsultants.com			
(Check if a is changed						
2. DATE 07		2022				
3. FEC IDENTIFIC	ation NU	MBER ► C co	00820845			
4. IS THIS STATEN	IENT	NEW (N) OR	X AMENDED (A)			
I certify that I have e	examined thi	s Statement and to the best	of my knowledge and belief it	is true, correct	and complete.	
Type or Print Name of	of Treasurer	Brown, Yolanda, , ,				
Signature of Treasure	er Brown,	Yolanda, , ,	[Electronically Filed]	Date 07	/ D D / 21	2022
NOTE: Submission of	false, erroned		may subject the person signing t FION SHOULD BE REPORTED			U.S.C. §3010
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FOR (Revised 06/2	

Image# 202207219525014125

07/21/2022 12 : 14

 TYPE OF COMMITTEE: Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate information below.) 	
(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 Office State Party Affiliation Sought: House Senate President	
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee: (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 Vo 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 par committee. (i.e., nonconnected committee)	y
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) x 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.	L														J	С				
2.	L														J	С				

	FEC Form 1 (Revised 02/2009)	Page	e 3	
١	Write or Type Committee Name			
	Paid Leave PAC			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership I NONE	PAC	Spon	sor

Relationship: Connected C	Drga	aniz	zatio	on	A	١ffili	ate	d C)rga	aniz	atic	n	Ľ	J	oin	t Fu	ndr	ais	ing	Re	pre	sen	itati	ve		Le	ade	ersh	ip F	PAC	Sp	onsor
								Cľ	ΓY										:	ST	ATE					Z	ΊP	со	DE			
																								L					- [
Mailing Address					1																											

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

Brown, Yola	anda, , ,
Full Name	
Mailing Address	1931 CORDOVA RD
	Fort Lauderdale FL 33316 - - - -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 202 - 763 - 5530

Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of 8. any designated agent (e.g., assistant treasurer).

Full Name	Brown, Yolanda, , ,
of Treasurer	
Mailing Address	1931 CORDOVA RD
	Fort Lauderdale FL 33316
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
	Telephone number 202 - 763 - 5530

FEC Form 1 (Revised 02	2/20	09))																		F	Pag	е 4	ŀ		
Full Name of Designated Agent	1													1											1	
Mailing Address																										
						Cľ	TΥ							:	STA	ΤE				ZI	ΡC		Œ			
Title or Position ▼																										
										Tele	əph	one	e n	umł	ber				- [_							

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.

	Amalga	amated	Ban	k																		
Mailing Address		275 Sev	enth A	ven	ue																	
		9th Floo	or																			
		New Yo	ork										_ N	 Y		0001						
						CI	ΤY					S	STA	ΤE			Z	IP (COE	DE 4		
Name of Bank, [Depository,	etc.																				
Mailing Address																						
						CI	ΤY					ę	STA	ΤE			Z	IP (COE	DE 4		