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STATEMENT OF ORGANIZATION

FORM 1		URGANIZ	ATION		
				(Office Use Only
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
	rizona				
ADDRESS (number a	nd street)	PO Box 26058			
(Check if a is changed					
	,	Phoenix └── CITY ▲		AZ STATE ▲	5058 – ZIP CODE ▲
COMMITTEE'S E-MA	AIL ADDRES	S			
(Check if a is changed		compliance@katzcomplianc	ce.com		
-		Optional Second E-Mail Add	dress		
COMMITTEE'S WEB	address				
2. DATE 1		2023			
3. FEC IDENTIFIC	CATION NU	MBER ► C C	00837062		
4. IS THIS STATEM	MENT	NEW (N) OR	× AMENDED (A)		
I certify that I have e	examined this	s Statement and to the best	of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name	of Treasurer	Tinsmon, Cassie, , ,			
Signature of Treasure	er Tinsmo	on, Cassie, , ,		Date 11	/ D D / Y Y Y Y 29 2023
NOTE: Submission of	false, erroned		may subject the person signing the TION SHOULD BE REPORTED V		e penalties of 52 U.S.C. §30109
Office Use Only			For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	ontact:	FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 03/2022) Page 2 TYPE OF COMMITTEE: 5. **Candidate Committee:** This committee is a principal campaign committee. (Complete the candidate information below.) (a) X This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate (b) information below.) Name of Cherny, Andrei, , , Candidate State ΑZ Candidate Office DEM House Senate President Party Affiliation Sought: District 01 (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (National, State (Democratic, This committee is a (d) or subordinate) committee of the 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 w/o Capital Stock Labor Organization Corporation 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
2.

FEC Form 1 (Revised 02	2/2009)																						Pa	ge (3		
Write or Type Committee Name																											
Andrei for Arizona	а																										
6. Name of Any Connected Org	ganization, A	ffiliate	d Co	mmi	ittee	e, Jo	oin	t F	und	Irai	sing	g R	epr	ese	enta	tive	e, o	r L	ead	der	shi	pΡ	AC	Sp	oon	sor	
Serve America Victory	y Fund																										
Mailing Address	PO Box 2013																										
			I																								

	CITY A	STATE 🔺	ZIP CODE
Relationship: Connected Organization	Affiliated Organization	X Joint Fundraising Representative	Leadership PAC Sponsor

MA

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

_ISalem

Tinsmon, C	Cassie, , ,
Full Name	
Mailing Address	PO Box 33079
	1
	Washington DC 20033
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 202 - 548 - 0880

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	Tinsmon, Cassie, , ,				
Mailing Address	PO Box 33079				
	Washington DC 20033				
	CITY ▲ STATE ▲ ZIP CODE ▲				
Title or Position	7				
Treasurer 202 548 0880 Telephone number - - -					

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Full Name of Designated Agent		
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE
Title or Position ▼		
	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.

Ar	nalgamated Bank		
Mailing Address	275 7th Avenue		
	New York		001
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Depo	sitory, etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE