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. **Better Ohio PAC** 18079 Brick Mill Run ADDRESS (number and street) (Check if address is changed) Strongsville 44136 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS liz@pacmanagementservices.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 02 2021 C00767079 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. Curtis, Elizabeth, , , Type or Print Name of Treasurer Curtis, Elizabeth, , , [Electronically Filed] 04 02 2021 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

| | FEC Fo | rm 1 (Revised 02/2009) | Page 2 | | | |
|------------|------------------------|--|---|--|--|--|
| | | E OF COMMITTEE | | | | |
| | naidate | Committee: | | | | |
| (a) | ш | This committee is a principal campaign committee. (Complete the candidate information below.) | | | | |
| (b) | Ш | This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.) | plete the candidate | | | |
| | ne of didate | | | | | |
| | didate y Affiliatio | Office Sought: House Senate President | State | | | |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | District | | | |
| | ne of didate | | | | | |
| Par | arty Committee: | | | | | |
| (d) | | (National, State | Democratic, Republican, etc.) Party. | | | |
| Pol | itical A | ction Committee (PAC): | | | | |
| (e) | | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn | nected organization is a | | | |
| | | Corporation Corporation w/o Capital Stock | Labor Organization | | | |
| | | Membership Organization Trade Association | Cooperative | | | |
| | | In addition, this committee is a Lobbyist/Registrant PAC. | | | | |
| (f) | | | areasted fund or porty | | | |
| (f) | x | 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.) | | | | |
| Joir | nt Fund | raising Representative: | | | | |
| (g) | | 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. | o 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. | o or more political | | | |
| | Com | mittees Participating in Joint Fundraiser | | | | |
| | 1. | FEC ID number | | | | |
| | 2. | | | | | |
| | 3. | FEC ID number | | | | |
| | 4. | | | | | |

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|---|---|-------------------------|--|--|--|
| Write or Type Committee Name | | - | | | |
| Better Ohio PAG | | | | | |
| | rganization, Affiliated Committee, Joint Fundraising Representative, or Leade | ership PAC Sponsor | | | |
| NONE | | | | | |
| | | | | | |
| Mailing Address | | | | | |
| | | | | | |
| | | | | | |
| | CITY STATE | ZIP CODE | | | |
| Relationship: Connected | Organization Affiliated Committee Joint Fundraising Representative | Leadership PAC Sponsor | | | |
| Custodian of Records: Identification books and records. | tify by name, address (phone number optional) and position of the person in p | oossession of committee | | | |
| Curtis, Eliz | abeth, , , | | | | |
| Mailing Address | 441 North Lee Street | | | | |
| Mailing Address | Ste 100 | | | | |
| | Alexandria VA 22314 | 1 | | | |
| Title or Position | CITY STATE | ZIP CODE | | | |
| Treasurer | Telephone number 609 - | 433 - 8620 | | | |
| Treasurer: List the name and any designated agent (e.g., a | address (phone number optional) of the treasurer of the committee; and the ssistant treasurer). | name and address of | | | |
| Full Name Curtis, Elizabeth, , , of Treasurer | | | | | |
| Mailing Address | 441 North Lee Street | | | | |
| | Ste 100 | | | | |
| | Alexandria VA 22314 CITY STATE | ZIP CODE | | | |
| Title or Position Treasurer | | 433 - 8620 | | | |

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|---|---------------------------------------|---------------|--|--|--|--|
| | | | | | | |
| Full Name of Designated Agent | Designated Burns, Shannon, , , | | | | | |
| Mailing Address | 18079 Brick Mill Run | | | | | |
| <u> </u> | | | | | | |
| | Strongsville OH 44136 CITY STATE ZIF | P CODE | | | | |
| Title or Position | | 3 | | | | |
| 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. | | | | | | |
| | Chain Bridge Bank | | | | | |
| Mailing Address | 1445-A Laughlin Ave | | | | | |
| | McLean VA 22101 | | | | | |
| | CITY STATE ZII | P CODE | | | | |
| Name of Bank, [| Depository, etc. | | | | | |
| | | | | | | |
| Mailing Address | | | | | | |
| | | | | | | |
| | | | | | | |
| | CITY STATE ZII | P 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:

Consistent with the stipulated judgment in Carey v. FEC, this Committee intends to establish a separate bank account to deposit and withdraw funds raised in unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: