

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines.

12FE4M5

Unite the Country

ADDRESS (number and street)

PO Box 15845

☒(Check if address
is changed)

c/o Mele Brengarth & Assoc. LLC

Washington

CITY ▲

DC

STATE ▲

20003

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒(Check if address
is changed)

finance@unitethecountry.com

Optional Second E-Mail Address

utc@mbacg.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address
is changed)

www.unitethecountry.com

2. DATE

MM / DD / YYYY
07 / 29 / 2021

3. FEC IDENTIFICATION NUMBER ►

C C00701888

4. 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.

Type or Print Name of Treasurer Morris, Michael, , ,

Signature of Treasurer

Morris, Michael, , ,

[Electronically Filed]

Date

MM / DD / YYYY
07 / 29 / 2021

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

5. 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 candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: ☐ House ☐ Senate ☐ President State 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 (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 ☐ 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 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.)

Joint Fundraising Representative:

- (g) ☐ 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.
- (h) ☐ 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.	_____	FEC ID number	C	_____
2.	_____	FEC ID number	C	_____
3.	_____	FEC ID number	C	_____
4.	_____	FEC ID number	C	_____

Write or Type Committee Name

Unite the Country

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

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

Full Name

Brengarth, Megan, , ,

Mailing Address

PO Box 15845

c/o Mele Brengarth & Assoc. LLC

Washington

DC

20003

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

Telephone number

617

443

4773

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

Morris, Michael, , ,

Mailing Address

PO Box 15845

c/o Mele Brengarth & Assoc. LLC

Washington

DC

20003

Title or Position
Treasurer

CITY

STATE

ZIP CODE

Telephone number

617

443

4773

Full Name of
Designated
Agent

Bregarth, Megan, , ,

Mailing Address

PO Box 15845

c/o Mele Bregarth & Assoc. LLC

Washington

DC

20003

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

617

443

4773

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.

Amalgamated Bank

Mailing Address

275 Seventh Ave

New York

NY

10003

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

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: