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STATEMENT OF ORGANIZATION

FORM 1			Of	ffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Andy Kim for New	Jersey			
ADDRESS (number and street)	PO BOX 211			
(Check if address				
is changed)	Mariton		NJ 080	053
	CITY ▲		STATE A	ZIP CODE A
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	janica@pcmsllc.com			
(2 5.1.1.1g2 5)	Optional Second E-Mail Add	Iress		
	acastaneda@pcmsllc.com			
 (Check if address is changed) 2. DATE 				
3. FEC IDENTIFICATION N	UMBER ► C CO	0648220		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined the	nis Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name of Treasure	r Kyriacopoulos, Janica, , ,			
Signature of Treasurer Kyria	acopoulos, Janica, , ,		Date 05	D D / Y Y Y Y 15 / 2024
NOTE: Submission of false, error		nay subject the person signing th		penalties of 52 U.S.C. §3010
Office Use Only		For further information cc 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:	
Candidate Committee:	
(a) X This committee is a principal campaign committee. (Complete the candidate information bel	low.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (C information below.)	Complete the candidate
Name of Kim, Andy, , , Candidate Kim, Andy, , ,	
Candidate DEM Office Sought: House X Senate Pres	State NJ sident District
(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 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 committee. (i.e., nonconnected committee)	e segregated 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 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.
 2.

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14/	FEC Form 1 (Revised (Page 3
vv	rite or Type Committee Name Andy Kim for Ne		
<u>.</u>	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
	Mailing Address	PO BOX 2013	
		SALEM MA 01970	
		CITY A STATE A ZIF	P CODE ▲
	Relationship: Connected		P CODE ▲ dership PAC

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

Kyriacopo	ulos, Janica, , ,				
Full Name					
Mailing Address	PO Box 65322				
	Washington			20035	
		CITY 🔺	STATE		ZIP CODE
Title or Position ▼					
Treasurer			Telephone number	202	628 - 1580

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	Kyriacopoulos, Janica, , ,
Mailing Address	PO Box 65322
	Washington DC 20035
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Treasurer	Image:

FEC Form 1 (Revised 02	2/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A Z	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.

	Bank of America		
Mailing Address	351 W Route 70		
	Marlton	NJ 08053	3
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, D	Pepository, etc.		
	Amalgamated Bank		
Mailing Address	1825 K St NW		
	Washington		
	CITY 🔺	STATE A	ZIP CODE

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5(g) or	(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6. N	lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
		ID		
	Mailing Address	ONE PARK ROW, 5TH FLOOR		
		Providence		02903
	Relationship:		STATE ▲	
	Connected	Organization Affiliated Committee X Joint	t Fundraising Representa	ative Leadership PAC Sponsor
_				
	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
		by name, address (phone number – optional)		
- 8. D	Full Name	by name, address (phone number – optional)		
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- 8. D	Full Name			
8. 0	Full Name		STATE ▲	
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9. E s	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or ma Jame of Bank, Woodsl Depository, etc.	CITY A CITY A Te ties: List all banks or other depositories in which intains funds.	elephone Number	

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CITY 🔺		5			ZIP CODE	
	Telep	hone Nu	Imber			
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		t all banks or other depositories in which the	t all banks or other depositories in which the committ	t all banks or other depositories in which the committee deposits	Telephone Number	Telephone Number

2.			number (0
3.			number (
4.			number (
. Name of Any Connect	ed Organization, Affiliated Committee, Jo	sint Eundraising Ren	recontative	or Loodorchin BAC Sponsor
	ALTMAN VICTORY FUND	IIIt runuraising nop	lesentative,	Of Leadership The openset
Mailing Address	PO BOX 65322			
	Washington			
Relationship:	CITY A		STATE A	ZIP CODE A
Conne	cted Organization	× Joint Fundraising	Representativ	ve Leadership PAC Sponso
. Designated Agent: Ide	ntify by name, address (phone number – op	otional)		
. Designated Agent: Ider Full Name	ntify by name, address (phone number – or	otional)		
	ntify by name, address (phone number – or	otional)		
Full Name	ntify by name, address (phone number – or	otional)		
Full Name	ntify by name, address (phone number – op	ptional)		
Full Name				
Full Name				
Full Name				
Full Name Mailing Address	Image: Image	Telephone No	umber	
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Full Name Mailing Address TITLE OR POSITIO		Telephone No	umber	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposes		Telephone No	umber	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposes		Telephone No	umber	

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

ZIP CODE

STATE 🔺

5(g) or (h).	Joint Fundraising	Participant:		
-	1.		FEC ID number	С
2	2.		FEC ID number	С
3	3.		FEC ID number	C
2	4		FEC ID number	С
	-	rganization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	600 PENNSYLVANIA AVE SE		
		#15180		
				20003
	Relationship:		STATE 🔺	ZIP CODE
	Connected	Organization	undraising Represent	ative Leadership PAC Sponsor
8. Des i	ignated Agent: Identify	by name, address (phone number – optional)		
	ignated Agent: Identify	by name, address (phone number – optional)		
		by name, address (phone number - optional)		
	Full Name	by name, address (phone number - optional)		
	Full Name	by name, address (phone number - optional)		
	Full Name		□	
	Full Name		STATE A	
). Ban	Full Name	Image: Image	ephone Number	
9. Ban safe Nam	Full Name Mailing Address TITLE OR POSITION	CITY A CITY Tele Es: List all banks or other depositories in which the that ins funds.	ephone Number	s funds, holds accounts, rents
9. Ban safe Nam	Full Name Mailing Address TITLE OR POSITION T L Mailing Address	CITY A CITY Tele Es: List all banks or other depositories in which the that ins funds.	ephone Number	s funds, holds accounts, rents
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or (h). Joint Fundraisir	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
BLUE SENATE 2024	•		
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
			20003
Relationship:		STATE A	ZIP CODE
Designated Agent: Identif	y by name, address (phone number - optional)		
Full Name			
Full Name			
Mailing Address			
	•	STATE	
	Te	elephone Number	
Mailing Address TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or mail Name of Bank, Depository, etc.	Te	elephone Number	
Mailing Address TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or mail Name of Bank, Depository, etc.	Te	elephone Number	

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5(g) or ((h). Joint Fundraising	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
6. N	-	Drganization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	Mailing Address	PO BOX 65322		
		WASHINGTON		20035
	Relationship:		STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
_				
8. D	esignated Agent: Identify	by name, address (phone number - optional)		
8. D	Pesignated Agent: Identify	by name, address (phone number – optional)		
8. D		by name, address (phone number - optional)		
8. D	Full Name	by name, address (phone number - optional)		
8. D	Full Name	by name, address (phone number - optional)		
8. D	Full Name			
8. D	Full Name		STATE	
9. B	Full Name		elephone Number	
9. B Si N	Full Name Mailing Address TITLE OR POSITION		elephone Number	
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