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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Gallego Hodge Victory Fund PO Box 65322 ADDRESS (number and street) (Check if address is changed) Washington 20035 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS janica@pcmsllc.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00806257 FEC IDENTIFICATION NUMBER > 3. X 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. Kyriacopoulos, Janica, , , Type or Print Name of Treasurer Kyriacopoulos, Janica, , , [Electronically Filed] 02 2022 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 Only

Local 202-694-1100

F	EC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Can	didate	Committee:	
(a)	Ш	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. (Compinformation below.)	lete the candidate
Name Candi			
Candi Party	idate Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name Candi			
Part	y Con	nmittee:	
(d)		· · · ·	Democratic, Republican, etc.) Party.
Polit	ical 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)	п	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg	progeted fund or party
(f)	ш	committee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Fund	raising Representative:	
(g)	x	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.	GALLEGO FOR ARIZONA	58627
	2.	FRIENDS OF JEVIN D. HODGE FEC ID number C C007	78464
	3.	FEC ID number	
	4.		

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Write or Type Committee Nam		
Gallego Hodge	Victory Fund	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
NONE		
<u> </u>		
Mailing Address		
Mulling Address		
		-  '
	CITY STATE	ZIP CODE
		eadership PAC Sponsor
<ul> <li>Custodian of Records: Ide books and records.</li> </ul>	entify by name, address (phone number optional) and position of the person in po	ssession of committee
Kyriacopo	oulos, Janica, , ,	
Mailing Address	PO Box 65322	
Mailing Address		
	Washington DC 20035	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 202	628   -   1580
. <b>Treasurer</b> : List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	ame and address of
Full Name Kyriacopo of Treasurer	oulos, Janica, , ,	
Mailing Address	PO Box 65322	
	Washington DC 20035	
Title or Position Treasurer	CITY STATE  Telephone number 202	ZIP CODE  628   -   1580

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1_1 1
	Telephone number	
	Depository, etc.	
	Depository, etc.  Amalgamated Bank  1825 K St NW	
Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW	
Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW	
Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW	ZIP CODE
Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Depository, etc.	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Depository, etc.	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Depository, etc.	ZIP CODE