NON4 : 10 : NO : OM : OO489496

FEC FORM 1

STATEMENT OF **ORGANIZATION**

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2024 OCT 29 AM II: 29

			Of	lice Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FÉ4M5	0
Walton _I County _I Democratic	Executive Committee 1			
			1-1-1-1-1	
ADDRESS (number and street)	РО Вох 1996	 		
☐	L	<u> </u>		
	Smata Rosa Beach ; CITY ▲		FL 324	159
COMMITTEE'S E-MAIL ADDRE	ss			
☐ ◀ (Check if address is changed)	Treasurer@waltoncoun	tydemograts.com		
- '	Optional Second E-Mail Add	dress		
	wadegillham@gmail.co	<u>m </u>	<u> </u>	
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)	www.waltongountydem	φcrats.com		
2. DATE 10 10	2024			
3. FEC IDENTIFICATION N	JMBER ▶ C			
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 i	s true, correct and	I complete.
Type or Print Name of Treasure				
Signature of Treasurer	Vade dur		Date 10	22 2024
NOTE: Submission of false, erron		may subject the person signing th		penalties of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530		FEC FORM 1 (Revised 03/2022)

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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. (Comple information below.)	ete the candidate
Name of Candidate Kamala Harris	
Candidate Office House Senate President	State FL District 01
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	111111
Party Committee:	
(Mational, State (Demo	ocratic, olican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	inected organization is a:
Corporation Corporation w/o Capital Stock	bor Organization
Membership Organization Trade Association Co	poperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated 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 (Hyb	orid 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 committees/organizations, at least one of which is an authorized committee of a federal candidate	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundraiser	_
1. L	

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V	Vrite or Type Committee Na	ime .	
<u>_v</u>	/alton County Democrat	ic Executive Committee	
6.	Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representation	tive, or Leadership PAC Sponsor
	Florida _l Democratic P	arty, , , , , , , , , , , , , , , , , , ,	
	Mailing Address	201 South Monroe Street	<u></u>
		Suite 300;	
		Tallahassee FL	32301 -
		CITY ▲ STATE	E ▲ ZIP CODE ▲
	Relationship: Connec	cted Organization Affiliated Organization Joint Fundraising Repre	esentative Leadership PAC Sponso
	Daw C	·	
7.	books and records.	dentify by name, address (phone number optional) and position of the p	erson in possession of committee
	Mailing Address	50 Gossamer կane լ լ լ լ լ լ լ լ լ լ լ լ	<u> </u>
		Unit ₁ 11,	
		Inlet _i Beach	32461 -
		CITY ▲ STATE	
	Title or Position ▼		<u> </u>
	Treasuren	Telephone number	504 - 442 - 1903
8.	Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the comm g., assistant treasurer).	nittee; and the name and address of
	Full Name of Treasurer Wade	e Gillhamı <u> </u>	
	Mailing Address	PO βοχ 1996	
		Santa Rosa Beach	32459 - -

CITY A ZIP CODE A STATE A Title or Position ▼

J- <u>442</u> J- <u>1903</u> Treasuren 504 Telephone number

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	Full Name of Designated Agent	Samanth Herring	
	Mailing Address	[PO Вох 1996	
		· Later to the term of the ter	ليبيب
		Santa Rosa Beach	
	Title or Position	•	IP CODE ▲
		Telephone number	
9.	Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, holds a exes or maintains funds.	accounts, rents
	Name of Bank, D	Depository, etc.	
		All In Gredit Union	
	Mailing Address	200 Mack Bayou Road	
		Santa Rosa Beach	
		CITY ▲ STATE ▲ Z	IP CODE ▲
	Name of Bank, D	Depository, etc.	
	Mailing Address		
	•		
		CITY ▲ STATE ▲ Z	IP CODE ▲

Optional Supplemental Information for Lines 5(i) or (j), 6, 8 and/or 9

Page	 of	

5(i) or (j)	. Joint Fundraising	Participant:		
	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
6. N	ame of Any Connected (Organization, Affiliated Committee, Joint Fundrai	sing Representativ	e, or Leadership PAC Sponsor
•	Liliii			
	Mailing Address			
	-			
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee Joint F	undraising Represent	ative Leadership PAC Sponsor
8. D e	esignated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address	1		
	Walling Address			
				<u> </u>
		CITY _	STATE A	ZIP CODE ▲
	TITLE OR POSITION	*		ZIF CODE =
		Tele	ephone Number	
sa N	anks or Other Depositor afety deposit boxes or mai ame of Bank, epository, etc.		ne committee depos	,
	Mailing Address	1		
	maning Addiess			
				<u> </u>
ı		CITY ▲	STATE ▲	ZIP CODE ▲ ·

Washington, DC 20463

1050 First. Street NE

Federal Election Commission

nta Rosa Beach, FL 32459 9661 x0g

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FEC MAILCENTER

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Received via Email		Date of Receipt
Received from Electronic Filing Office	9	Date of Receipt
Other (Specify):	Date of F	Receipt or Postmarked
MAO		10/29/24
(4/2023)		DATE PREPARED