PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Team Herschel's People's Champion Committee 900 CIRCLE 75 ADDRESS (number and street) SUITE 100 (Check if address is changed) ATLANTA 30339 GΑ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS salpurpura2010@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00792192 FEC IDENTIFICATION NUMBER 3. 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. PURPURA, SALVATORE, , MR., Type or Print Name of Treasurer PURPURA, SALVATORE, , MR., [Electronically Filed] 07 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1

0	Office		For further information contact:
lι	Use		Federal Election Commission
c	Only		Toll Free 800-424-9530 Local 202-694-1100
	•		Local 202-034-1100

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. TYPE OF COMMITTEE:						
Candidate Committee:	didate Committee:					
(a) This committee is a principal campaign committee. (Complete the candi	date information below.)					
(b) This committee is an authorized committee, and is NOT a principal can information below.)	npaign committee. (Complete the candidate					
Name of Candidate						
Candidate Office Party Affiliation Sought: House Ser	nate President District					
(c) This committee supports/opposes only one candidate, and is NOT an a	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 organ	nization on line 6.) Its connected organization is a:					
Corporation Corporation w/o Capital	Stock Labor Organization					
Membership Organization Trade Association	Cooperative					
	Cooperative					
In addition, this committee is a Lobbyist/Registrant PAC.	In addition, this committee is a Lobbyist/Registrant PAC.					
(f) This committee supports/opposes more than one Federal candidate, an committee. (i.e., nonconnected committee)	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 spor	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 and n	contribution accounts (Hybrid PAC).					
In addition, this committee is a Lobbyist/Registrant PAC.	(, , , , , , , , , , , , , , , , , , ,					
Joint Fundraising Representative:						
This committee collects contributions, pays fundraising expenses and di	sburses net proceeds for two or more political					
(i) x committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(j) This committee collects contributions, pays fundraising expenses and di committees/organizations, none of which is an authorized committee of	·					
Committees Participating in Joint Fundraiser						
PEOPLE'S CHAMPION PAC	C C00792069					
TEAM HERSCHEL INC	C C00787853					

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V	Write or Type Committee N					
	Team Herso	hel's People's Champion Committee				
6.		ed Organization, Affiliated Committee, Joint Fundraising Represei				
	1					
	Mailing Address					
		CITY ▲ ST.	ATE ▲ ZIP CODE ▲			
	Relationship: Conne	ected Organization Affiliated Organization Joint Fundraising Re	presentative Leadership PAC Sponse			
7.	Custodian of Records: books and records.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	PURF	PURA, SALVATORE, , Mr.,				
	Full Name					
	Mailing Address	6334 PUMPERNICKEL LANE				
		MONROE [NC 28110			
		CITY ▲ ST	ATE ▲ ZIP CODE ▲			
	Title or Position ▼					
	TREASURER	Telephone number	704 - 668 - 1993			
8.		e and address (phone number optional) of the treasurer of the core.g., assistant treasurer).	nmittee; and the name and address of			
	Full Name PURF	PURA, SALVATORE, , MR,				
	of Treasurer					
	Mailing Address	6334 PUMPERNICKEL LANE				
		MONROE	NC 28110			
	Title or Position ▼	CITY ▲ STA	ATE ▲ ZIP CODE ▲			
	TREASURER		704 - 668 - 1993			

Telephone number

PASSANTINO. STEFAN, MR, Agent Mailing Address 1600 MAINE AVE SW ATH FL WASHINGTON DC 20024 Title or Position ▼ ATTORNEY-IN-FACT Telephone number - ATTORNEY-IN-FACT Telephone number - 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 LAUGHLIN AVE Mailing Address 1445 LAUGHLIN AVE Mailing Address 1500 GALLERIA PARKWAY SE STET 100 ATLANTA GA 30339 - ATLANTA GA 30339 - ATLANTA CITY ▲ STATE ▲ ZIP CODE ▲ CITY ▲ STATE ▲ ZIP CODE ▲ CITY ▲ STATE ▲ ZIP CODE ▲	FEC Form 1	(Revised 02/2009)		Page 4
Title or Position ATTORNEY-IN-FACT Telephone number Telephone n	Designated Agent	1600 MAINE AVE SW 4TH FL WASHINGTON		
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 LAUGHLIN AVE CITY A STATE A ZIP CODE A Name of Bank, Depository, etc. SERVISFIRST BANK Mailing Address 1300 GALLERIA PARKWAY SE STE 100 ATLANTA GA 30339	Title or Position		SIAIE	ZIP CODE A
Name of Bank, Depository, etc. CHAIN BRIDGE BANK Mailing Address 1445 LAUGHLIN AVE MCLEAN CITY ▲ STATE ▲ ZIP CODE ▲ Name of Bank, Depository, etc. SERVISFIRST BANK Mailing Address 300 GALLERIA PARKWAY SE STE 100 ATLANTA GA 30339	ATTORNEY-IN-F	ACT Telephone no	umber	
CHAIN BRIDGE BANK Mailing Address 1445 LAUGHLIN AVE MCLEAN CITY A STATE A ZIP CODE A Name of Bank, Depository, etc. SERVISFIRST BANK Mailing Address 300 GALLERIA PARKWAY SE STE 100 ATLANTA GA 30339 ATLANTA			ttee deposits fund	ds, holds accounts, rents
Mailing Address MCLEAN	Name of Bank, D	epository, etc.		
Mailing Address 300 GALLERIA PARKWAY SE STE 100 ATLANTA GA 30339 -	Mailing Address	1445 LAUGHLIN AVE		
Mailing Address 300 GALLERIA PARKWAY SE STE 100 ATLANTA GA 30339 -	Name of Bank, D	depository, etc.		
CITY ▲ STATE ▲ ZIP CODE ▲	Mailing Address	300 GALLERIA PARKWAY SE STE 100	GA	30339
		CITY ▲	STATE ▲	ZIP CODE ▲

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

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5(a)	or(h). Joint Fundraisin	g Participant:		
(3)	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
ŝ.	Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representati	ve, or Leadership PAC Sponsor
	Mailing Address			I
	3			
				1
	Relationship:	CITY A	STATE 4	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Joint Fundraising Represer	tative Leadership PAC Sponsor
3.	Full Name	y by name, address (phone number – optior	al)	
	Mailing Address	1		
	TITLE OR POSITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
			Telephone Number	
9.	Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in vaintains funds.	which the committee depos	its funds, holds accounts, rents
	Name of Bank, SOUT	HERN FIRST BANK		
	Depository, etc.			
	Mailing Address	309 EAST PACES FERRY ROAD NE,		
	Mailing Address	309 EAST PACES FERRY ROAD NE, STE 102		
	Mailing Address		GA GA	30305