Only

STATEMENT OF

PAGE 1 / 16

FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Connecticut Democratic State Central Committee 750 Main Street ADDRESS (number and street) Suite 1108-3 (Check if address is changed) Hartford 06103 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS compliance@ctdems.org (Check if address is changed) Optional Second E-Mail Address arnold@ctcomplianceandlaw.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.ctdems.org (Check if address is changed) DATE 03 23 2023 C00167320 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. Alves, Roberto, , , Type or Print Name of Treasurer Alves, Roberto, , , [Electronically Filed] Date 04 05 2023 Signature of Treasurer 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FE	C Form	1 (Revised 03/2022)	Page 2
5.	TYPE C	OF COMMITTEE:	
	Candid	date 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 information below.)	candidate
	Name Candi		
	Candio Party	date Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
		ne of didate	
	Party (Committee:	
	(d) x	This committee is a STA (National, State or subordinate) committee of the DEM (Democratic, Republican,	etc.) Party
	Politica	al 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 Or	ganization
		Membership Organization Trade Association Cooperat	
		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 committee. (i.e., nonconnected committee)	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 PAG	C).
		In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint F	Fundraising Representative:	
	(i)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(j)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	C	

Title or Position ▼

Treasurer

	_		
		Revised 02/2009)	Page 3
V	Vrite or Type Committe		
		ut Democratic State Central Committee	
6.		nected Organization, Affiliated Committee, Joint Fundraising Representative, or I	_eadership PAC Sponsor
	Democratic G	rassroots Victory Fund	
	Mailing Address	430 South Capitol Street, SE	
		Washington DC	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: C	onnected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records.	rds: Identify by name, address (phone number optional) and position of the person in p	ossession of committee
	А	lves, Roberto, , ,	
	Full Name		
	Mailing Address	750 Main Street	
		Suite 1108-3	
		Hartford CT	06103
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number 860	560 1775
8.		name and address (phone number optional) of the treasurer of the committee; and nt (e.g., assistant treasurer).	I the name and address of
	Full Name A	Ives, Roberto, , ,	
	of Treasurer		
	Mailing Address	750 Main Street	
		Suite 1108-3	
		Hartford CT	06103
		CITY ▲ STATE ▲	ZIP CODE ▲

860

Telephone number

560

1775

FE	EC Form 1	(Revised 02/2009)		Page 4
Full Na Desigr Agent		Alvez, Roberto, , ,		
Mailing	g Address	750 Main Street Suite 1108-3		
		Hartford	CT	06103
Title o	r Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
Treas		Telephone	number	860 - 560 - 1775
		Depositories: List all banks or other depositories in which the comes or maintains funds.	mittee deposits	funds, holds accounts, rents
Name	of Bank, D	epository, etc.		
		Webster Bank		
Mailing	g Address	145 Bank Street		
		Waterbury	CT	06702
		CITY ▲	STATE ▲	ZIP CODE ▲
Name	of Bank, D	epository, etc.		
		Amalgamated Bank		
Mailing	g Address	825 K Street, NW		
		Washington	DC .	20006
		CITY A	DC DC STATE ▲	ZIP CODE ▲

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

JF Committee 'Murphy Victory Fund' renamed 'Chris Murphy Victory Fund'; 'All in CT' JF Representative added.

Form/Schedule: Transaction ID:

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi r	ig Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
Dollars for Demo	crats		
<u> </u>			
	. 420 So. Copital Street, S.E.		
Mailing Address	430 So. Capitol Street, S.E.		
	Washington	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
_			
	d Organization Affiliated Committee Join y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
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FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	l Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
DSP Joint Victory	/ Fund		
Mailing Address	430 So Capitol Street, S.E		
ivialility Address			
	Washington	, DC	20003
Polotic coltic			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
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FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisir	ng Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fund	raising Representative	, or Leadership PAC Sponsor
	DNC Services Co	prp./Democratic National Committee		
	Mailing Address	430 So. Capitol Street, S.E.		
		Washington	DC L	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee	t Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OD DOCITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	•		ZIP CODE ▲
	TITLE OR POSITION	•	STATE ▲ elephone Number	ZIP CODE ▲
9.	Banks or Other Deposito	Tories: List all banks or other depositories in which	elephone Number	
9.		Tories: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Deposito	Tories: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Deposito safety deposit boxes or manner of Bank,	Tories: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	Tories: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	Tories: List all banks or other depositories in which	elephone Number	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	430 South Capitol Street, S.E.		
		Washington	DC	20003
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee Y Joint	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tel	ephone Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which t intains funds.	he committee deposit	s funds, holds accounts, rents
	Name of Bank,			
	Name of Bank, Depository, etc.			
	Depository, etc.			
	Depository, etc.			

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
Biden Victory Fur	nd 		
	430 South Capitol Street SE		
Mailing Address			
	Washington	DC DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
DeLauro Victory	Fund 		
	910 17th Street, NW, Suite 925		
Mailing Address			
			20000
	Washington	DC DC	20006
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	Leadership PAC Spanish
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Mailing Address					
Relationship:	Washington		DC	20006	
Relationship:	CITY ▲	✗ Joint Fundrais	STATE A		ZIP CODE ▲ Leadership PAC Spor
	cted Organization Affiliated Committee				
Designated Agent: Ider	attify by name, address (phone number – op				
Designated Agent: Iden					
Designated Agent: Iden					
Designated Agent: Iden	ntify by name, address (phone number – op		STATE A		ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
,,,,	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	4.			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	, or Leadership PAC Sponsor
	Courtney Victory F	Fund		
	Mailing Address	910 17th St NW Suite 925		
		1		
		Washington	DC	20006
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
	_		0 .	_
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name			ZIR CODE A
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
	Full Name _ _ _ Mailing Address TITLE OR POSITION	CITY A	STATE A	
	Full Name _ _ _ Mailing Address TITLE OR POSITION	CITY CITY Te	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY CITY Te	STATE A	
	Full Name	CITY CITY Tes: List all banks or other depositories in which intains funds.	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail. Name of Bank,	CITY CITY Testies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Testies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Testies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	

FEC Form 1S (Revised 02/2017) fo

TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or many Name of Bank, Depository, etc. Mailing Address	ries: List all banks o	CITY A	STATE A Telephone Number	ZIP CODE TIP CODE
Banks or Other Deposito cafety deposit boxes or management of Bank, Depository, etc.	ries: List all banks o		Telephone Number	
Banks or Other Deposito cafety deposit boxes or management of Bank, Depository, etc.	ries: List all banks o		Telephone Number	
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Banks or Other Deposito	ries: List all banks o		Telephone Number	
			Telephone Number	
TITLE OR POSITION	▼	CITY A	1	ZIP CODE A
TITLE OR POSITION	\	CITY A	STATE ▲	ZIP CODE A
				710 0005
Mailing Address				
Full Name				
Designated Agent: Identify	y by name, address ((phone number – optional)		
Connected	d Organization	Affiliated Committee	int Fundraising Represen	tative Leadership PAC Spo
Relationship:		CITY A	STATE A	ZIP CODE ▲
	Montpelier		VT	05601
Maning Addiess				
Mailing Address	PO Box 1220			
Name of Any Connected New England Vict			draising Representation	re, or Leadership PAC Sponso
4.				
4.			FEC ID number	C
3.			FEC ID number	C
3.		ı	FEC ID number	C
1			FEC ID number	C

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

h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected Chris Murphy Vic	I Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
Ciliis Waiping Vic			
Mailing Address	PO Box 65322		
Mailing Address			
	Washington	, DC	20035
Deletionship			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Joinfy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC S
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FEC Form 1S (Revised 02/2017)

5(g) or	(h). Joint Fundraising	Participant:			
	1.			FEC ID number	C
	2.			FEC ID number	C
	3.			FEC ID number	C
	4.			FEC ID number	C
-					
6. I	Name of Any Connected	Organization, Affiliated Co	ommittee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
	All III CT				
	Mailing Address	PO Box 15320			
		Washington		DC	20003
	Relationship:	C	ITY 🛦	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated	Committee X Join	t Fundraising Representa	Leadership PAC Sponsor
3. C	Designated Agent: Identify Full Name	by name, address (phone	number - optional)		
	Mailing Address	1			
	Mailing Address				
				STATE A	ZIP CODE A
	TITLE OR POSITION	▼ CII	Y ▲	SIAIE	ZIP CODE A
				elephone Number	
s 1	Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc. Mailing Address		depositories in which	the committee deposit	s funds, holds accounts, rents
		CIT	~Y A	STATE ▲	ZIP CODE ▲