FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Melanie Ram 4 US Senate 3633 Market Place W Apt.406 ADDRESS (number and street) (Check if address is changed) University Place 98466 WA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS ram4ussenate@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.ram4ussenate.com (Check if address is changed) DATE 30 2024 C00877944 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. Type or Print Name of Treasurer Ram, Melanie,, Ram, Melanie, , , Date 05 02 2024 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

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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. (Complete the candidate information below.) | | | | | |
| Name of Candidate Ram, Melanie, , , | | | | | | |
| | Candidate Party Affiliation REP Office Sought: House X Senate President | State WA District 00 | | | | |
| | (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. | 2.001 | | | | |
| Name of Candidate | | | | | | |
| | Party Committee: | | | | | |
| | (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) | c.) Party | | | | |
| Political Action Committee (PAC): | | | | | | |
| | (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6. | organization is a: | | | | |
| | Corporation Corporation w/o Capital Stock Labor Orga | nization | | | | |
| | 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 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 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 | | | | | |

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|----|--|--------------------------------------|--|-------------------|-----------------------|
| ٧ | Vrite or Type Committee Name | | | | |
| | Melanie Ram 4 l | JS Senate | | | |
| 6. | Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor | | | | |
| | NONE | | | | |
| | | | | | |
| | Mailing Address | | | | |
| | | | <u> </u> | | |
| | | | | | |
| | | CITY ▲ | S | TATE A | ZIP CODE ▲ |
| | Relationship: Connected | Organization Affiliated Organization | Joint Fundraising R | epresentative | Leadership PAC Sponso |
| | | _ | | | |
| 7. | Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. | | | | |
| | Ram, Mela | nie, , , | | | |
| | Full Name | | | | |
| | Mailing Address | 3633 Market Place W Apt.406 | | | |
| | | | <u> </u> | | |
| | | University Place | | WA 98466 | · |
| | | CITY ▲ | S ⁻ | TATE ▲ | ZIP CODE ▲ |
| | Title or Position ▼ | | | | |
| | Campaign Treasurer | | Telephone numbe | er 206 – [| 507 - 4700 |
| 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 Ram, Mela | nie, , , | | | |
| | | 3633 Market Place W Apt.406 | | | |
| | Mailing Address | | | | |
| | | | | | |
| | | University Place | | WA 98466 | · |
| | | CITY ▲ | S | TATE ▲ | ZIP CODE ▲ |
| | Title or Position ▼ | | | | |
| | Campaign Treasurer | | Telephone numbe | er | 507 4700 |

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|-------------------------------------|---|---------------|--|--|--|
| Full Name of Designated Agent | | | | | |
| Mailing Address | | | | | |
| | | | | | |
| | | | | | |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ | | | |
| Title or Position | | | | | |
| | 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. | | | | | |
| | Global Credit Union | | | | |
| Mailing Address | 6510 6th Ave | | | | |
| | | | | | |
| | Tacoma WA | 98406 | | | |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ | | | |
| Name of Bank, Depository, etc. | | | | | |
| | | | | | |
| Mailing Address | | | | | |
| | | | | | |
| | | | | | |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ | | | |