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FEC FORM 1		ORGA			-							Offic	e Use	Only			-
1. NAME OF COMMITTEE (in	full)	(Check if is change		Examp over th			type		12I	FE4	M5			1			
Groundwor	k Proje	ect PAC															
ADDRESS (number a	nd street)	124 Washington St	treet		1 1			I	1 1	I		I					
(Check if a	address	Suite 101								i							
is changed	1)	Foxboro					.		MĄ	·		0203	5		- ,		
		CITY ▲							STAT		L			ZIP C	ODE		
COMMITTEE'S E-MA		SS															
(Check if a is changed		lpaulson@vlpo	c.com					I		I		I					
le changee	·)	Optional Second I	E-Mail Add	lress													
Check if a is changed	address I)																
2. DATE																	
3. FEC IDENTIFIC	CATION NU	IMBER 🕨	C co	0543504													
4. IS THIS STATEN	IENT	NEW (N)	OR	×	AME	NDE	D (A)										
I certify that I have e	examined th	is Statement and to	the best	of my kno	wledge	and	belief	it is	true	, cor	rect	and c	omple	ete.			
Type or Print Name of	of Treasurer	Lowey, Keith, D., ,															
Signature of Treasure	er Lowey	, Keith, D., ,		[E	ectronic	ally F	iled]	D	ate	[09	1	23) /		22	Y
NOTE: Submission of	false, errone	ous, or incomplete ir ANY CHANGE IN					-	-					enaltie	es of 5	2 U.S.	C. §3(0109
Office Use Only				Fe To	r furthe deral Ele Il Free 8 cal 202-	ection (00-424	Commi -9530		act:						RM . /2012)		

EC Form 1 (Revised 03/2022)	Page 2
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. (Compinformation below.)	plete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate Presiden	Statet District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
(d) This committee is a	nocratic, ublican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is a:
Corporation Corporation w/o Capital Stock	abor Organization
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 seg committee. (i.e., nonconnected committee)	gregated 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) x This committee is a political committee with both contribution and non-contribution accounts (Hy	/brid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	

- This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (i) 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.	L													С				
2.	L													С				

Relationship:

Connected Organization

_								
	FEC Form 1 (Revised 02	2/2009)						Page 3
V	Vrite or Type Committee Name							
	Groundwork Pr	oject	PAC					
6.	Name of Any Connected Or NONE	ganizatior	n, Affiliate	d Committ	tee, Joint Fu	ndraising Represent	ative, or Leader	ship PAC Sponsor
	Mailing Address							
				CITY 🔺	L	STAT	TE ▲	ZIP CODE ▲

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Joint Fundraising Representative

Leadership PAC Sponsor

Affiliated Organization

Lowey, Ke	eith, D., ,	
Full Name		
Mailing Address	124 Washington Street	
	Suite 101	
	Foxboro MA 02035	
	CITY A STATE A	ZIP CODE
Title or Position ▼		
Treasurer	Telephone number	543 - 1720

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	Lowey, Keith, D., ,
of Treasurer	
Mailing Address	124 Washington Street
	Suite 101
	Foxboro MA 02035 Image: Image
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Telephone number 508 - 543 - 1720

FEC Form 1 (Revised 02	2/:	20	09	9)																						Pa	ge ·	4	
Full Name of Designated Agent													1																
Mailing Address	L																												
	L																												
	L																									·	- [_		
								Cľ	TΥ										ST	ATE				Z	ΊP	со	DE		
Title or Position ▼																													
													٦	Fele	eph	one	e n	um	ber				- [- [

9. 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.

L			
Mailing Address	134 Nahatan Street		
	Norwood	MA	
	CITY 🔺	STATE ▲	ZIP CODE
Name of Bank, De	epository, etc.		
L	Amalgamated Bank		
Mailing Address	1825 K Street NW		
	Washington		20006

STATE **A**

ZIP CODE A

CITY

FFC	Form	1S	(Revised	02/2017)
	1 01111	10	(11041300	02/2017)

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

5(g) or (h).	Joint	Fundraising	Participant:
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1. [FEC ID number	С
2.	FEC ID number	C
3.	FEC ID number	С
4.	FEC ID number	С

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NDRC and Groundwork Project Fund

	awork i roject i ur	u la			r
Mailing Address	124 Washington Street				
	Suite 101				
	Foxboro			MA 02035	5
Relationship:		CITY A		STATE A	ZIP CODE
Connected	Organization Affilia	ted Committee	✓ Joint Fundraising	Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																												
Mailing Address																												
																										- [_		
TITLE OR POSITION	▼					С	ITY	^									S	TAT	E				ZIP	С	DD	E 🔺		
												Те	lep	hor	ne I	Nur	nbe	er			·				- [_			

9. 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.																															
Mailing Address																															
	L																														
																												- [
	CITY A													STATE A								ZIP CODE									