Image# 202210279541920241		10/2//2022 15 : 39		
FEC FORM 1	STATEME ORGANIZ	-		
1. NAME OF	(Check if name	Example: If typing, type		Office Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
	RATIC PARTY			
<u> </u>				
ADDRESS (number and street)	5661 Fleur Drive			
(Check if address is changed)				
<u> </u>	Des Moines		IA 50	0321
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDF	RESS			
(Check if address is changed)	mwatson@iowademo	crats.org		
is changed)	Optional Second E-Mail Ad	ldress		
 (Check if address is changed) 				
2. DATE 10	27 / Y Y Y Y 2022			
3. FEC IDENTIFICATION	NUMBER ► C c	:00035600		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined	this Statement and to the best	t of my knowledge and belief	it is true, correct an	nd complete.
	Seger Kar			
Type or Print Name of Treasu	rer Sagar, Ken, , ,			
Signature of Treasurer ^{Sag}	ar, Ken, , ,	[Electronically Filed]	Date 10	/ D D / Y Y Y Y 27 2022
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMA	may subject the person signing		e penalties of 52 U.S.C. §301
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	contact:	FEC FORM 1 (Revised 06/2012)

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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. (Complein information below.)	ete the candidate
Name of Candidate	
Candidate Office Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee: (National, State or subordinate) committee of the DEM (Demo Republic) (d) X This committee is a STA or subordinate) committee of the DEM Republic	ocratic, lican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:
Corporation Corporation w/o Capital Stock	oor Organization
Membership Organization Trade Association	operative
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 (Hybr	rid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	<i>,</i>
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.
 (j) Committees Participating in Joint Fundraiser
 2.

Γ	-						
	FEC Form 1 (Revised 02	2/2009)					Page 3
V	Irite or Type Committee Name						
	IOWA DEMOC	RATIC PAR	ΤY				
6.	Name of Any Connected Or Cindy Axne Victory F	-	Committee	e, Joint Fu	undraising Re	presentative, or Le	adership PAC Sponsor
	Mailing Address	5825 Waterbury Circle					
		Des Moines					0312
			CITY ▲			STATE 🔺	ZIP CODE
	Relationship: Connected	Organization Affiliate	ed Organiz	ation X	Joint Fundrais	sing Representative	Leadership PAC Sponsor

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

Watson, M	lelissa, , ,
Full Name	
Mailing Address	4312 Kingman Blvd.
	Des Moines IA 50311
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
	Telephone number 515 - 490 - 7178

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	Sagar, Ken, , ,										
of Treasurer											
Mailing Address	5661 Fleur Drive										
	Des Moines IA 50321										
	CITY ▲ STATE ▲ ZIP CODE ▲										
Title or Position	,										
Treasurer 515 244 7292 Telephone number 1 1 1 1											

FEC Form 1 (Revised 02	FEC Form 1 (Revised 02/2009)															F	Page 4															
Full Name of Designated Agent	1																			1											1	
Mailing Address																																
	CITY 🔺															:	STA	ΤE				ZI	ΡC		Œ							
Title or Position ▼																																
																Tele	əph	one	e n	umł	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.

West E	Bank													
Mailing Address	3839 Merle Hay Road, Suite 190													
	Des Moines	IA 50310												
	CITY A	STATE A	ZIP CODE											
Name of Bank, Depository, etc.														
	amated Bank													
Mailing Address	1825 K Street, NW													

STATE **A**

ZIP CODE A

CITY

FFC	Form	1 S	(Revised	02/2017)
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5(g) or (h).	Joint	Fundraising	Participant:
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2 FEC ID number			
2. FEC ID number	_		
3 FEC ID number C			
4 FEC ID number			

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor DNC State Party Victory Fund

Mailing Address	430 South Capitol Street	
	Washington	DC 20003
Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
Connected (Organization Affiliated Committee	Joint Fundraising Representative

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

Full Name																														J
Mailing Address	L																													
	L																													
	L																						L					- [
TITLE OR POSITION	TITLE OR POSITION V																S	TAT	E				ZIF	C	DC	E				
	Telepl													hor	ne I	Nur	nbe	ər			 - L				- []			

Name of Bank, Amalga Depository, etc.	mated Bank		
Mailing Address	275 Seventh Avenue		
	New York	NY	
	CITY A	STATE 🔺	ZIP CODE 🔺

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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 Democratic Grassroots Victory Fund

]
Mailing Address	430 South Capitol Street SE		
	Washington		20003
Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
Connected	Organization Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor

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

Full Name											
Mailing Address											
TITLE OR POSITION	TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲										
	I I I I I I I I I Tel	phone Number									

Name of Bank, Iowa St Depository, etc.	ate Bank		
Mailing Address	3601 EP True Parkway		
	West Des Moines		50265
	CITY A	STATE A	ZIP CODE 🔺

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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 Dollars for Democrats

Mailing Address	430 South Capitol Street, Suite 30		
	Washington		20003
Relationship:	CITY A	STATE A	ZIP CODE
Connected C	Drganization Affiliated Committee	X Joint Fundraising Representative	Leadership PAC Sponsor

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

Full Name																												
Mailing Address																												
	L																											
																					L					- [_		
TITLE OR POSITION	TITLE OR POSITION V											S	TAT	E				ZIP	C	DD	E 🖌							
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Name of Bank, Ohnwa Depository, etc.	rd Bank & Trust		
Mailing Address	65 Marion Blvd.		
	Marion		52302
	CITY 🔺	STATE A	ZIP CODE 🔺

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5(g) or (h).	Joint	Fundraising	Participant:

1	FEC ID number	С
2.	FEC ID number	С
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 LIZ MATHIS VICTORY FUND

Mailing Address	5825 WATERBURY CIRCLE			
			IA 503	
Relationship:	CITY A		STATE A	ZIP CODE
Connected	Organization Affiliated Committee	Joint Fundraising	g Representative	Leadership PAC Sponsor

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

Full Name																															
Mailing Address	L	1				1															1										
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Name of Bank, Midwes Depository, etc.	stOne Bank		
Mailing Address	102 South Clinton Street		
	lowa City		52240
		STATE A	ZIP CODE

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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 BOHANNAN VICTORY FUND

Mailing Address				
-				
				312
Relationship:	CITY 🔺		STATE 🔺	ZIP CODE
Connected	Organization Affiliated Committee	X Joint Fundraising	g Representative	Leadership PAC Sponsor

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

Full Name																													
Mailing Address		1																											
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Name of Bank, Bankers Depository, etc.	s Trust			
Mailing Address	717 7th Street			
	Des Moines			50309
	CITY 🔺	STATE A	ZIP CODE 🔺	

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2.	FEC ID number	С
3.	FEC ID number	C
4.	FEC ID number	C

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor FRANKEN VICTORY FUND

Mailing Address	2813 VIRGINIA PL			
	DES MOINES		IA 50321	
Relationship:	CITY A	ST		ZIP CODE
Connected	Organization	× Joint Fundraising Re	epresentative	Leadership PAC Sponsor

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

Full Name				
Mailing Address				
TITLE OR POSITION	7	CITY A	STATE A	ZIP CODE
		Telephon	e Number	

Name of Bank, Depository, etc.																													
Mailing Address	L																												
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	CITY 🔺											STATE ▲ ZIP CODE							E	∎▲									