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. The Halcyon Party 202 Gold Kettle Drive ADDRESS (number and street) (Check if address is changed) Gaithersburg 20878 MD CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS steven.behrns@keylenterprises.com (Check if address is changed) Optional Second E-Mail Address iguintilian@hotmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00692442 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. Behrns, Steven, Keyl, , Type or Print Name of Treasurer Behrns, Steven, Keyl, , [Electronically Filed] 05 2023 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. 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.)					
This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate '',',',',',',',',',',',',',',',',',','					
Candidate Party Affiliation Office Sought: House Sena	State President District				
(c) This committee supports/opposes only one candidate, and is NOT an aut	thorized committee.				
Name of Candidate					
Party Committee:					
(d) This committee is a NAT (National, State or subordinate) committee of the	(Democratic, UN Republican, etc.) Party				
of substantate) committee of the	riopublican, cic./ rarry				
Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization)	zation on line 6.) Its connected organization is a:				
Corporation Corporation w/o Capital S	Stock Labor 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 committee. (i.e., nonconnected committee)	is NOT a separate segregated 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-co	ntribution accounts (Hybrid PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.					
Joint Fundraising Representative:					
This committee collects contributions, pays fundraising expenses and disk	purses net proceeds for two or more political				
(i) Committee collects contributions, pays fundialising expenses and disburses her proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
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.	C				

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٧	Vrite or Type Committee Name			
	The Halcyon P	arty		
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor	
	Mailing Address			
		CITY ▲ STATE ▲	ZIP CODE ▲	
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representa		
	Tiolationomp.	Allimated Organization South Fundationing Propresented	Loadolollip 1710 Opolloo	
	Custodian of Pocords: Ident	ify by name, address (phone number entional) and position of the nerse	n in necession of committee	
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of corbooks and records. 				
	Behrns, Ste	even, Keyl, ,		
	Full Name			
	Mailing Address	13110 Bradley Farm Dr.		
		Herndon	20171	
		CITY ▲ STATE ▲	ZIP CODE ▲	
	Title or Position ▼	SINI	ZII OODE =	
	National Chairman		888	
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 Behrns, Ste	even, Keyl, ,		
	of Treasurer			
	Mailing Address	13110 Bradley Farm Dr.		
		Herndon VA	20171	
		CITY ▲ STATE ▲	ZIP CODE ▲	
	Title or Position ▼			
		Telephone number	888	

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Full Name of Quintilian Designated Agent	n, Jeff, , ,							
Mailing Address	202 Gold Kettle Dr.							
	Gaithersburg	MD L	20878					
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲					
		Telephone number						
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in vaintains funds.	which the committee deposits fur	nds, holds accounts, rents					
Name of Bank, Depository,	Name of Bank, Depository, etc.							
Wells	Fargo							
Mailing Address	501 Elden St.							
	Herndon	VA L	20171					
	CITY ▲	STATE ▲	ZIP CODE ▲					
Name of Bank, Depository, etc.								
Mailing Address								
	CITY ▲	STATE ▲	ZIP CODE ▲					