FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE
17 JUN 30 PM 3:09

Office Use Only
12FE4M5

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

Bob Casey for Senate Inc

ADDRESS (number and street) ☐ ◄ (Check if address is changed)

PO BOX 58746

Philadelphia — CITY ▲
PA — STATE ▲
19102 - ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒ ◄ (Check if address is changed)

Aubrey@thecampaigncompliancefirm.com

Optional Second E-Mail Address
joleary@bobcasey.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ ◄ (Check if address is changed)

www.BobCasey.com

2. DATE MM 06 / DD 29 / YYYY 2017

3. FEC IDENTIFICATION NUMBER ▶ C C00431056

4. 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 Lyons, Charles, , ,

Signature of Treasurer *Lyons, Charles, ,* Date MM 06 / DD 29 / YYYY 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

201705300200164270

5. TYPE OF COMMITTEE

Candidate Committee:

(a) [x] 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: Casey, Robert, P., , Jr.

Candidate Party Affiliation: DEM

Office Sought: [ ] House [x] Senate [ ] President

State: PA

District:

(c) [ ] This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate:

Party Committee:

(d) [ ] This committee is a [ ] (National, State or subordinate) committee of the [ ] (Democratic, Republican, etc.) Party.

Political 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 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 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.)

Joint Fundraising Representative:

(g) [ ] 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.

(h) [ ] 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. FEC ID number C
2. FEC ID number C
3. FEC ID number C
4. FEC ID number C

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Write or Type Committee Name

Bob Casey for Senate Inc

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

Keystone Victory Fund

Mailing Address: PO BOX 58746

Philadelphia (CITY) PA (STATE) 19102 - (ZIP CODE)

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☒ Joint Fundraising 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.

Full Name: Lyons, Charles, , ,

Mailing Address: PO BOX 58746

Philadlephia (CITY) PA (STATE) 19102 - (ZIP CODE)

Title or Position: Treasurer

Telephone number: 215 - 880 - 7224

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 of Treasurer: Lyons, Charles, , ,

Mailing Address: PO BOX 58746

Philadelphia (CITY) PA (STATE) 19102 - (ZIP CODE)

Title or Position: Treasurer

Telephone number: 215 - 880 - 7224

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Full Name of Designated Agent: Montgomery, Aubrey, , ,

Mailing Address: 30 South 15th Street, 15th Floor

Philadelphia (CITY) PA (STATE) 19102 - (ZIP CODE)

Title or Position: Compliance Director

Telephone number: 215 - 995 - 3189

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.: PNC Bank

Mailing Address: 1600 Market Street

Philadelphia (CITY) PA (STATE) 19102 - (ZIP CODE)

Name of Bank, Depository, etc.: Amalgamated Bank

Mailing Address: 1825 K St NW

Washington (CITY) DC (STATE) 20006 - (ZIP CODE)

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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. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Ohio Pennsylvania Victory Fund

Mailing Address 918 Pennsylvania Ave SE

Washington (CITY ▲) DC (STATE ▲) 20003 - (ZIP CODE ▲)

Relationship:

- [ ] Connected Organization
- [ ] Affiliated Committee
- [x] Joint Fundraising Representative
- [ ] Leadership PAC Sponsor

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

Full Name

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

TITLE OR POSITION ▼

Telephone Number -

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

CITY ▲ STATE ▲ ZIP CODE ▲

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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. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Rhode Island Pennsylvania Victory Fund

Mailing Address: 918 Pennsylvania Ave SE

Washington (CITY ▲) DC (STATE ▲) 20003 - (ZIP CODE ▲)

Relationship:

- [ ] Connected Organization
- [ ] Affiliated Committee
- [x] Joint Fundraising Representative
- [ ] Leadership PAC Sponsor

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

Full Name

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

TITLE OR POSITION ▼

Telephone Number - -

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

CITY ▲ STATE ▲ ZIP CODE ▲

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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. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Blue Senate 2018

Mailing Address 918 Pennsylvania Ave SE

Washington (CITY ▲) DC (STATE ▲) 20003 - (ZIP CODE ▲)

Relationship:

- [ ] Connected Organization
- [ ] Affiliated Committee
- [x] Joint Fundraising Representative
- [ ] Leadership PAC Sponsor

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

Full Name

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

TITLE OR POSITION ▼

Telephone Number - -

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

CITY ▲ STATE ▲ ZIP CODE ▲

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

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. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Justice 2018

Mailing Address 918 Pennsylvania Ave, SE

Washington (CITY ▲) DC (STATE ▲) 20003 - (ZIP CODE ▲)

Relationship:

- [ ] Connected Organization
- [ ] Affiliated Committee
- [x] Joint Fundraising Representative
- [ ] Leadership PAC Sponsor

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

Full Name

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

TITLE OR POSITION ▼

Telephone Number - -

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

CITY ▲ STATE ▲ ZIP CODE ▲

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

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. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Green Senate IMPACT 2018

Mailing Address 918 Pennsylvania AVe SE

Washington (CITY ▲) DC (STATE ▲) 20003 - (ZIP CODE ▲)

Relationship:

- [ ] Connected Organization
- [ ] Affiliated Committee
- [x] Joint Fundraising Representative
- [ ] Leadership PAC Sponsor

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

Full Name

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

TITLE OR POSITION ▼

Telephone Number -

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

CITY ▲ STATE ▲ ZIP CODE ▲

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Faxed

or

Hand Delivered

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JULIE E. ADAMS
SECRETARY

DANA K. MACCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232

WASHINGTON, DC 20510-7116

PHONE(202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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USPS EXPRESS MAIL _____
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