FEC

Only

STATEMENT OF

PAGE 1/9

ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Democratic Executive Committee of Florida 201 S. Monroe ADDRESS (number and street) Ste. 301 (Check if address is changed) Tallahassee 32301 FL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS marcus@floridadems.org (Check if address X is changed) Optional Second E-Mail Address pwhough@politicalcfos.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.floridadems.org (Check if address is changed) DATE 30 2021 C00005561 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. Garcia, Fran, , , Type or Print Name of Treasurer Garcia, Fran,,, [Electronically Filed] 06 30 2021 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	ш	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.)	ete the candidate
	ne of ndidate		
	ndidate ty Affiliati	Office on Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of ndidate		
Pa	rty Con	nmittee:	
(d)	×	CTA ' ' DEM '	Democratic, epublican, etc.) Party.
Pol	litical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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)	П	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg	regated fund or party
(.)	ш	committee. (i.e., nonconnected committee)	ogaioa iana oi party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joii	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised (02/2009)	Page 3
Write or Type Committee Name	9	
Democratic Exe	ecutive Committee of Florida	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representat	ive, or Leadership PAC Sponsor
Dollars for Democrats		
Mailing Address	430 South Capitol Street SE	
	Ste 300 Washington DC CITY STATE	20003
Relationship: Connected	CITY STATE d Organization Affiliated Committee Joint Fundraising Represe	
. Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of th	e person in possession of committee
-, Political Full Name	CFOs Inc, , ,	
Mailing Address	3000 Airport Dr.	
	Erie	80516
Title or Position	CITY STATE	ZIP CODE
CFO	Telephone number	703 - 549 - 7236
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the commit assistant treasurer).	tee; and the name and address of
Full Name Garcia, Fra	an, , ,	
Mailing Address	201 S. Monroe, Ste. 301	
	Tallahassee	32301
Title or Position , Treasurer	CITY STATE	ZIP CODE 850 222 3411
	Telephone number	000 - 222 - 3411

FEC Form 1 (F		
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit boxes o		unds, noids accounts, rents
safety deposit boxes of Name of Bank, Depos	r maintains funds. itory, etc. pital City Bank 217 North Monroe Street	
safety deposit boxes of Name of Bank, Depos	r maintains funds. itory, etc. pital City Bank	unas, noias accounts, rents
safety deposit boxes of Name of Bank, Depos	r maintains funds. itory, etc. pital City Bank 217 North Monroe Street	
safety deposit boxes of Name of Bank, Depos	r maintains funds. itory, etc. pital City Bank 217 North Monroe Street Tallahassee FL CITY STATE	32301
safety deposit boxes of Name of Bank, Deposition Deposition Name of Bank, Deposition Name of Bank, Deposition Name of Bank, Deposition Deposition Name of Bank, Deposition	r maintains funds. itory, etc. pital City Bank 217 North Monroe Street Tallahassee FL CITY STATE	32301
safety deposit boxes of Name of Bank, Deposition Deposition Name of Bank, Deposition Name of Bank, Deposition Name of Bank, Deposition Deposition Name of Bank, Deposition	r maintains funds. itory, etc. pital City Bank 217 North Monroe Street Tallahassee FL CITY STATE	32301
safety deposit boxes of Name of Bank, Deposition Ca Mailing Address Name of Bank, Deposition Am	r maintains funds. itory, etc. pital City Bank 217 North Monroe Street Tallahassee FL CITY STATE itory, etc.	32301
safety deposit boxes of Name of Bank, Deposition Ca Mailing Address Name of Bank, Deposition Am	r maintains funds. itory, etc. pital City Bank 217 North Monroe Street Tallahassee FL CITY STATE itory, etc.	32301

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

FEC Form 1S (Revised 02/2017)

Page ____ **of** 9

5(g) or (h). Joint Fundraising Participant: C FEC ID number C FEC ID number C FEC ID number 3. C FEC ID number Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6. Democratic National Committee State Party Victory Fund 430 South Capitol Street SE Mailing Address 20003 Washington Relationship: ZIP CODE A CITY A STATE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number - optional) 8. Full Name Mailing Address ZIP CODE CITY A STATE A TITLE OR POSITION ▼ Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds. TD Bank, N.A. Name of Bank, Depository, etc. PO Box 1377 Mailing Address Lewiston ME 04243 CITY A STATE A ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

Page ____ **of** ____

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
		Organization, Affiliated Committee, Joint Fundrals	sing Representative	e, or Leadership PAC Sponsor
L	emocratic Grassr	oots Victory Fund		
	Mailing Address	430 South Capitol Street, SE		
	Ü			
		Washington	l DC	20003
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	undraising Representa	ative Leadership PAC Sponsor
o Dosig	nated Agents Identify	by name address (phone number entional)		
Fu	ull Name	by name, address (phone number — optional)		
Fu		by name, address (phone number – optional)		
Fu	ull Name	by name, address (phone number – optional)		
Fu	ull Name	by name, address (phone number – optional)		
Fu M	ull Name	CITY A	STATE A	ZIP CODE A
Fu M	ull Name	CITY A	STATE A	ZIP CODE A
Fu Manes Safety	ailing Address TITLE OR POSITION s or Other Depositori deposit boxes or main of Bank,	CITY Tele es: List all banks or other depositories in which the	phone Number	
Fu Manes Safety	ailing Address TITLE OR POSITION s or Other Depositori deposit boxes or main of Bank, sitory, etc.	CITY Tele es: List all banks or other depositories in which the	phone Number	
Fu Manes Safety	ailing Address TITLE OR POSITION s or Other Depositori deposit boxes or main of Bank,	CITY Tele es: List all banks or other depositories in which the	phone Number	
Fu Manes Safety	ailing Address TITLE OR POSITION s or Other Depositori deposit boxes or main of Bank, sitory, etc.	CITY Tele es: List all banks or other depositories in which the	phone Number	

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

FEC Form 1S (Revised 02/2017)

Page ____ **of** ____

			FEC	D number	C
	<u> </u>		FEC	D number	С
			FEC	D number	С
	1 1 1 1 1 1		 FEC	D number	С
Any Connected	Organization A	ffiliated Committee Joint	Fundraising Pa	nrecentativ	a ar Lagdarchin DAC Snans
=	_				
ng Address	PO BOX 205				
	WINTER PAR	K		FL	32790
tionship:		CITY ▲		STATE ▲	ZIP CODE ▲
	Organization by name, addre	Affiliated Committee	Joint Fundraisin	ig Hepresent	Leader of the op-
d Agent: Identify					tative Leadership PAC Spo
d Agent: Identify					
d Agent: Identify					
d Agent: Identify		ess (phone number – option			
d Agent: Identify	by name, addre			STATE A	ZIP CODE A
	PHY VICTOR	PHY VICTORY FUND ng Address PO BOX 205 WINTER PAR	PHY VICTORY FUND ng Address PO BOX 205 WINTER PARK	Any Connected Organization, Affiliated Committee, Joint Fundraising Repetit VICTORY FUND PO BOX 205 WINTER PARK	Any Connected Organization, Affiliated Committee, Joint Fundraising Representative PHY VICTORY FUND PO BOX 205 WINTER PARK FL

FEC Form 1S (Revised 02/2017)

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

Page ____ **of** ____

1		Participant:				
				FEC I	D number	С
2. 🔟				FEC I	D number	С
3				FEC I	D number	C
4.				FEC I	D number	С
						
Name of A	Any Connected C	Organization, Affil	iated Committee, Joint	Fundraising Re	presentativo	e, or Leadership PAC Spons
MUCA	RSEL-POW	ELL 2018 VI	CTORY FUND		1 1 1 1	
Mailii	ng Address	430 SOUTH CAP	PITOL ST SE			
		2ND FLOOR				
		WASHINGTON		1	DC	20003
Relat	tionship:		CITY A		STATE A	ZIP CODE ▲
Full Na		by flame, address	(phone number – optic	riai)		
Mailing		1				
Mailing	Address					
Mailing	Address					
Mailing	Address					
	OR POSITION		CITY A		STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

Dogo	9	of ⁹	
Page	•	OT ~	

alame of Any Connected Organization, Affiliated Committee BIDEN VICTORY FUND Mailing Address 430 SOUTH CAPITOL STREET SE WASHINGTON Relationship: Connected Organization Affiliated Committee Pesignated Agent: Identify by name, address (phone number Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ CITY ▲ CITY ▲ CITY ▲ CITY A CITY	FEC I		
ame of Any Connected Organization, Affiliated Committee BIDEN VICTORY FUND Mailing Address 430 SOUTH CAPITOL STREET SE WASHINGTON Relationship: CITY ▲ Connected Organization Affiliated Committee esignated Agent: Identify by name, address (phone number Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ CITY ▲ anks or Other Depositories: List all banks or other deposite afety deposit boxes or maintains funds. ame of Bank, repository, etc.		D number	C
ame of Any Connected Organization, Affiliated Committee BIDEN VICTORY FUND Mailing Address 430 SOUTH CAPITOL STREET SE WASHINGTON Relationship: Connected Organization Affiliated Committee esignated Agent: Identify by name, address (phone number Full Name Mailing Address TITLE OR POSITION CITY CITY CITY anks or Other Depositories: List all banks or other deposite affety deposit boxes or maintains funds. ame of Bank, epository, etc.	FEC I	D number	С
ame of Any Connected Organization, Affiliated Committee BIDEN VICTORY FUND Mailing Address 430 SOUTH CAPITOL STREET SE WASHINGTON Relationship: CITY ▲ Connected Organization Affiliated Committee esignated Agent: Identify by name, address (phone number) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ CITY ▲ anks or Other Depositories: List all banks or other deposite afety deposit boxes or maintains funds. ame of Bank, epository, etc.		D number	C
BIDEN VICTORY FUND Mailing Address 430 SOUTH CAPITOL STREET SE WASHINGTON Relationship: Connected Organization Affiliated Committe esignated Agent: Identify by name, address (phone number) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ CITY ▲ CITY ▲ anks or Other Depositories: List all banks or other deposite afety deposit boxes or maintains funds. ame of Bank, epository, etc.	FEC I	D number	C
Mailing Address 430 SOUTH CAPITOL STREET SE WASHINGTON Relationship: CITY ▲ Connected Organization Affiliated Committe esignated Agent: Identify by name, address (phone number) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ CITY ▲ anks or Other Depositories: List all banks or other deposite afety deposit boxes or maintains funds. ame of Bank, epository, etc.	, Joint Fundraising Re	presentativ	e, or Leadership PAC Spon
Mailing Address WASHINGTON Relationship: CITY ▲ Connected Organization Affiliated Committe esignated Agent: Identify by name, address (phone number) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ anks or Other Depositories: List all banks or other deposite afety deposit boxes or maintains funds. ame of Bank, epository, etc.			
Mailing Address WASHINGTON Relationship: CITY ▲ Connected Organization Affiliated Committe esignated Agent: Identify by name, address (phone number) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ anks or Other Depositories: List all banks or other deposite aftety deposit boxes or maintains funds. ame of Bank, epository, etc.			
Relationship: Connected Organization Affiliated Committed esignated Agent: Identify by name, address (phone number) Full Name Mailing Address TITLE OR POSITION CITY CITY CITY anks or Other Depositories: List all banks or other depositories defety deposit boxes or maintains funds. ame of Bank, epository, etc.			
Relationship: Connected Organization Affiliated Committeesignated Agent: Identify by name, address (phone number Full Name Mailing Address TITLE OR POSITION CITY CITY CITY CITY Anks or Other Depositories: List all banks or other deposite afety deposit boxes or maintains funds. ame of Bank, epository, etc.			
Connected Organization		DC	20003
esignated Agent: Identify by name, address (phone number Full Name Mailing Address TITLE OR POSITION CITY anks or Other Depositories: List all banks or other depositoriety deposit boxes or maintains funds. ame of Bank, epository, etc.		STATE A	ZIP CODE ▲
Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ anks or Other Depositories: List all banks or other depositories deposite boxes or maintains funds. ame of Bank, epository, etc.	ee X Joint Fundraisin	g Represent	ative Leadership PAC S
TITLE OR POSITION ▼ CITY ▲ anks or Other Depositories: List all banks or other depositories defety deposit boxes or maintains funds. ame of Bank, epository, etc.			
TITLE OR POSITION ▼ CITY ▲ anks or Other Depositories: List all banks or other depositories deposite boxes or maintains funds. ame of Bank, epository, etc.			
TITLE OR POSITION ▼ CITY ▲ anks or Other Depositories: List all banks or other depositories deposite boxes or maintains funds. ame of Bank, epository, etc.			
anks or Other Depositories: List all banks or other depositories deposit boxes or maintains funds. ame of Bank, epository, etc.			
afety deposit boxes or maintains funds. ame of Bank, epository, etc.		STATE ▲	ZIP CODE ▲
afety deposit boxes or maintains funds. ame of Bank, epository, etc.	Telephone N	Number	
ame of Bank, epository, etc.		ittee deposi	s funds, holds accounts, ren
epository, etc.	ries in which the comm		
Mailing Address	ries in which the comm		
Lineration	ries in which the comm		
	ries in which the comm		
1	ries in which the comm		