Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Americans for Transparency 1390 Chainbridge Rd Ste 515 ADDRESS (number and street) SUITE 500 (Check if address is changed) McLean 22101 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS compliance@complianceconsultingva.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00824482 FEC IDENTIFICATION NUMBER 3. 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. Leon-Miller, Thais, , , Type or Print Name of Treasurer Leon-Miller, Thais, , , [Electronically Filed] 09 2022 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.)						
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	olete the candidate					
Name of Candidate						
Candidate Office House Senate President	State t 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	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) 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:						
(1)	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.						
Committees Participating in Joint Fundraiser						
1C						
C						

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٧	Vrite or Type Committee Name					
	Americans for		oint Fundraising Repr	esentative or Lead	dership PAC Sponsor	
<i>,</i> .	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE					
	Mailing Address					
		1				
		CITY A		STATE ▲	ZIP CODE ▲	
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising		Leadership PAC Sponso	
	Tielationship.	Allillated Organization	oont rundasing	J Hepresentative	Leadership 1 AC Oponso	
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number	optional) and position of	of the person in poss	ession of committee	
	Leon-Miller	, Thais, , ,				
	Full Name					
	Mailing Address	1390 Chainbridge Rd Ste 515				
		McLean		VA 2210	01	
		CITY ▲		STATE ▲	ZIP CODE ▲	
	Title or Position ▼					
	Treasurer		Telephone nun	nber 571 -	424 - 3798	
3.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) assistant treasurer).	of the treasurer of the	e committee; and the	e name and address of	
	Full Name Leon-Miller	, Thais, , ,				
	of Treasurer					
	Mailing Address	1390 Chainbridge Rd Ste 515				
		McLean		VA 221	01	
		CITY ▲		STATE ▲	ZIP CODE ▲	
	Title or Position ▼					
	Treasurer		Telephone nun	nber 571 -	424 - 3798	

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Full Name of Designated Agent						
Mailing Address						
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲				
	Telephone number					
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.						
	Chainbridge Bank					
Mailing Address	1445 A Laughlin Avenue					
	McLean VA 22101					
	CITY ▲ STATE ▲	ZIP CODE ▲				
Name of Bank, D	Depository, etc.					
Mailing Address						
	CITY ▲ STATE ▲	ZIP CODE ▲				

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: