STATEMENT OF

PAGE 1 / 4

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. Friends for O'Hara PO Box 271 ADDRESS (number and street) (Check if address is changed) Leesburg 31763 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS joe@oharaforcongress.com (Check if address is changed) Optional Second E-Mail Address dell1102@msn.com COMMITTEE'S WEB PAGE ADDRESS (URL) oharaforcongress.com (Check if address is changed) DATE 2021 C00791350 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. O'Hara, Joseph, , , Type or Print Name of Treasurer O'Hara, Joseph,,, [Electronically Filed] 10 12 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 Only

Local 202-694-1100

FEC	Form 1 (Revised 02/2009) Page 2
	COMMITTEE ate Committee:
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
(b) Name of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) O'Hara, Joe, , ,
Candidate)
Candidate Party Affi	DEM Similar
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	• [
Party C	committee: (National, State (Democratic,
(d)	This committee is a or subordinate) committee of the Republican, etc.) Party.
Politica	I 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 Fu	Indraising 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.
C	ommittees Participating in Joint Fundraiser
1.	FEC ID number C
2.	FEC ID number
3.	FEC ID number
1	

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam		Ŭ
Friends for O'H	lara	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
NONE		
Mailing Address		
3		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative L	eadership PAC Sponsor
 Custodian of Records: Ide books and records. 	entify by name, address (phone number optional) and position of the person in po	ossession of committee
O'Hara, J	oseph, , ,	
Full Name	PO Box 271	
Mailing Address		
	Leesburg GA 31763	_
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 321 - [405 3663
. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the n assistant treasurer).	ame and address of
Full Name O'Hara, Jo	oseph, , ,	
Mailing Address	PO Box 271	
-		
	Leesburg GA 31763	
Title or Desition	CITY STATE	ZIP CODE
Title or Position		405 3663

	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE Z	IP CODE
Title or Position		
	Telephone number	
	Amalgamated Bank	
Mailing Address	275 Seventh Avenue	
Mailing Address	275 Seventh Avenue New York NY 10001	
Mailing Address	New York NY 10001	IP CODE
Mailing Address Name of Bank,	New York CITY STATE Z	IP CODE
	New York CITY STATE Z	IP CODE
	New York CITY STATE Z Depository, etc.	IP CODE
Name of Bank, I	New York CITY STATE Z Depository, etc.	IP CODE
Name of Bank, I	New York CITY STATE Z Depository, etc.	IP CODE