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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. The Joshua Super PAC 6369 Rio Vista Drive ADDRESS (number and street) (Check if address is changed) Concord Township 44077 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kathy.fishel@yahoo.com (Check if address is changed) Optional Second E-Mail Address kathy.fishel@onetimewood.com COMMITTEE'S WEB PAGE ADDRESS (URL) thejoshuasuperpac.com (Check if address is changed) DATE 2022 C00810499 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. Fishel, Kathy, , , Type or Print Name of Treasurer Fishel, Kathy,,, [Electronically Filed] 03 2022 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

FI	FC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	1 aye 2
Cano	didate	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. (Cominformation below.)	plete the candidate
Name Candid			
Candid Party	date Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	y Con	nmittee:	(D
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 secommittee. (i.e., nonconnected committee)	egregated 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.)	
Joint	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.	vo 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.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name		<u> </u>
The Joshua Sup	er PAC	
•	anization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
NONE		
Mailing Address		
L		
	CITY STATE	ZIP CODE
Relationship: Connected C	rganization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
. Custodian of Records: Identify books and records.	y by name, address (phone number optional) and position of the person in	possession of committee
Fishel, Kathy		
	3369 Rio Vista Drive	
L	Concord Township OH 4407	7
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number 216	789 1961
3. Treasurer: List the name and a any designated agent (e.g., ass	ddress (phone number optional) of the treasurer of the committee; and the istant treasurer).	name and address of
Full Name Fishel, Kathy	,,	
of Treasurer	369 Rio Vista Drive	
<u> </u>		
	Concord Township OH 4407	7 , , l_l
L	CITY STATE	ZIP CODE
Title or Position		

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Full Name of Designated	Fishel, Connor, , ,	
Agent		
Mailing Address	6369 Rio Vista Drive	
	Concord Township OH 44077	
	CITY STATE ZI	IP CODE
Title or Position	Talanhara mumba 216 62	22 5130
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds, holds a oxes or maintains funds. Depository, etc. Great Lakes Bank	1 1 1 1 1 1
safety deposit b	Depository, etc. Great Lakes Bank 17001 Center Street	
safety deposit b Name of Bank,	Depository, etc. Great Lakes Bank 17001 Center Street	
safety deposit b Name of Bank,	Depository, etc. Great Lakes Bank 7001 Center Street Mentor OH 44060	ZIP CODE
safety deposit b Name of Bank,	Depository, etc. Great Lakes Bank 7001 Center Street Mentor CITY STATE Z	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Great Lakes Bank 7001 Center Street Mentor CITY STATE Z	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Great Lakes Bank 7001 Center Street Mentor CITY STATE Z Depository, etc.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Great Lakes Bank 7001 Center Street Mentor CITY STATE Z Depository, etc.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Great Lakes Bank 7001 Center Street Mentor CITY STATE Z Depository, etc.	

: 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: