Image# 202005229239492308				PAGE 1/5
FEC FORM 1	STATEMEI ORGANIZ			
1. NAME OF	(Check if name	Example: If typing, type		fice Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
Experienced Lea	dership Matters	PAC		
ADDRESS (number and street)	124 Washington Street			
(Check if address	Suite 101			
is changed)	Foxboro			35
	CITY ▲		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address	lleonard@vlpc.com			
is changed)	Optional Second E-Mail Ad	dross		
COMMITTEE'S WEB PAGE AD				
2. DATE 05 / 2	2 / Y Y Y Y 2020			
3. FEC IDENTIFICATION N	UMBER ► C c	00746792		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	t is true, correct and	complete.
		-		
Type or Print Name of Treasure	er Lowey, Keith, D, ,			
Signature of Treasurer	zy, Keith, D, ,	[Electronically Filed]	Date 05	22 / Y Y Y Y Y 22 2020
NOTE: Submission of false, erron		may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	contact:	FEC FORM 1 (Revised 06/2012)

05/22/2020 10 : 16

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FEC F	Form 1 (Revised 02/2009) Page 2
TYPE OF	COMMITTEE
Candida	te 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. (Complete the candidate information below.)
Name of Candidate	
Candidate Party Affilia	ation Office Sought: House Senate President District
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee:
(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
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f) x	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 Fur	ndraising 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.
Со	mmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Experienced Leadership Matters PAC

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

Mailing Address									
	CITY	(STATE	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.

Lowey, Ke	ith, D, ,
Full Name	
Mailing Address	124 Washington Street
	Suite 101
	Foxboro MA 02035
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number

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	Lowey, Keith, D, ,
Mailing Address	124 Washington Street
	Suite 101
	Foxboro MA 02035 - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - <t< td=""></t<>
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 508 543 1720

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																											
Mailing Address		L																									
		L																									
		L																		L							
							СП	ΓY									ST/	ΑΤΕ				ZII	PC	COD	ÞΕ		
Title or Position																											
						ĺ						Tele	eph	ione	e ni	uml	ber										

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.

Citizen	s Bank		
Mailing Address	134 Nahatan Street		
	Norwood	MA 02062	
	CITY	STATE ZI	IP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE ZI	IP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

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: