STATEMENT OF

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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. Hold the House Victory Fund 430 South Capitol Street SE ADDRESS (number and street) 2nd Floor (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS fec@blue-bird.net (Check if address is changed) Optional Second E-Mail Address compliance@dccc.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00746453 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. Guinn, Lucinda, , , Type or Print Name of Treasurer Guinn, Lucinda,,, [Electronically Filed] 05 15 2020 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 Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Car	ndidate	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.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Par	ty Con	nmittee:	
(d)			Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its confi	nected 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 segment of the supports of the support	gregated 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.)	
Joir	nt Fund	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	DCCC	00935
	2.	JOSH HARDER FOR CONGRESS FEC ID number C C006	39146
	3.	TJ COX FOR CONGRESS FEC ID number C C006	48956
	4.	CISNEROS FOR CONGRESS FEC ID number C C006	50648

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Write or Type Committee N		
Hold the Hous	se Victory Fund	
	ed Organization, Affiliated Committee, Joint Fundraising Representative, or I	Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the perso	on in possession of committee
Guinn, Full Name	, Lucinda, , ,	
	430 South Capitol St SE	
Mailing Address	2nd Floor	
	Washington DC 1	20003
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
. Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; and g., assistant treasurer).	d the name and address of
Full Name Guinn, of Treasurer	Lucinda, , ,	
Mailing Address	430 South Capitol St SE	
-		
	Washington DC 2	20003
Tille on De '''	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number 202	_ 863 _ 1500

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Full Name of Designated	Vogel, Taryn, , ,	, , , ,
Agent	. PO Pov 2452	
Mailing Address	PO Box 2153	
	Purcellville VA 20134	
	CITY STATE	ZIP CODE
Title or Position Assistant Treas	urer Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds, hold exes or maintains funds. Depository, etc. Amalgamated Bank	s accounts, rents
Mailing Address	1825 K St NW	
		<u> </u>
	Washington DC 20006	
	CITY STATE	ZIP CODE
Name of Bank,	Depository, etc.	
Mailing Address		
Mailing Address		
Mailing Address		

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DEBBIE FOR CONGRESS FEC ID number C C00652065 FEC ID number C C00672295 4. FIINKENAUER FOR CONGRESS FEC ID number C C00637074 Iame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC 3 Mailing Address Relationship: CITY A STATE A ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC 3 resignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION CITY A STATE A ZIP CODE A Telephone Number — Telephone Number — Intelleptone Number — Intelleptone States or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts afterly deposit boxes or maintains funds. Mailing Address	33982	063398	C0	(ber	uml	Dr	C II	FEC	F						S 	RES	NGF	CO	FOR	DA	Y ROUI	HARLEY	1.
A. FINKENAUER FOR CONGRESS FEC ID number C coo637074 Telephone Number Affiliated Committee Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts felty deposit boxes or maintains funds. FEC ID number C coo637074 Affiliated Committee, Joint Fundraising Representative, or Leadership PAC states and the package of the p	52065	065206	Co	(ber	uml	Dr	C II	FEG	F						ı			SS	IGRI	CON	FOR C	DEBBIE	2.
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S Mailing Address Mailing Address	72295	067229	Co	C	ber	uml	Dr	C II	FEC	F								TH	CBA	Y M(UC 	S OF L	FRIEND	3.
Mailing Address Relationship: CITY ▲ STATE ▲ ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership P/ Besignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE A Telephone Number Title OR POSITION ▼ Telephone Number Title OR Positionies: List all banks or other depositories in which the committee deposits funds, holds accounts agency of Bank, appository, etc.	37074	0637074	C00	(ber	uml	Dr	C II	FEG	F		Ш					S	RES	NG	R CC	FOF	IAUER I	FINKEN	4. [
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Telephone Number						epre	ng F	aisin	ındra	nt Fund			option		Comm			-				nt: Identify	ated Agent	Full
Telephone Number						epre	F I	aisin	ındra	nt Fund			option		Comm			-				nt: Identify	ated Agent	Full
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Mailing Address	ZIP CODE	ZIP				L L	ST				al)		option		umbe	ne r	(pho	-			y by	nt: Identify	ated Agent I Name	Full
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			nds,			ATE	ST	ne N	bhone	Teleph	al)	onal)		er — c	umbe	ne r	(pho	lress	, add	name	y by	osition Depositor Kes or ma	ated Agent I Name I Name I Name Or Other Edeposit box of Bank, tory, etc.	Full Ma
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5(g)	or(h). Joint Fundraisi r	ng Participant:		
,		FOR CONGRESS	FEC ID number	C C00646844
	LAUREN UND	ERWOOD FOR CONGRESS	FEC ID number	C C00652719
	SHARICE FOR	CONGRESS	FEC ID number	C C00670034
		O ELECT JARED GOLDEN	FEC ID number	C C00653816
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
	Mailing Address			
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee Join	t Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identif	y by name, address (phone number – optional)		
8.	Designated Agent: Identif	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
8. 9.	Full Name	CITY A To pries: List all banks or other depositories in which	elephone Number	
	Full Name	CITY A To pries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or main than the company of the co	CITY A To pries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or main to the safety deposit boxes or main to the safety depository, etc.	CITY A To pries: List all banks or other depositories in which	elephone Number	
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5(g)	or(h). Joint Fundraisin	g Participant:				
	ANGIE CRAIG	FOR CONGRESS	FEC ID nu	mber C	C00575209	
	2. ANDY KIM FOR	R CONGRESS	FEC ID nu	mber C	C00648220	
	3. XOCHITL FOR	NEW MEXICO	FEC ID nu	mber C	C00666149	
	SUSIE LEE FO	R CONGRESS	FEC ID nu	mber C	C00655613	
6.	Name of Any Connected	Organization, Affiliated Committee, Join	t Fundraising Represe	entative, or	Leadership PAC Spo	nsor
	Mailing Address					1
	Mailing Address					
	Relationship:	OITY			710 0005 +	
		CITY ▲	_	ATE A	ZIP CODE ▲	
	Connected	d Organization Affiliated Committee	Joint Fundraising Rep	resentative	Leadership PAC S	Sponsor
8.	Designated Agent: Identify	by name, address (phone number - option	onal)			
8.	Designated Agent: Identify Full Name	by name, address (phone number – option	onal)			
8.		by name, address (phone number – option	onal)			
8.	Full Name	by name, address (phone number – option	onal)			
8.	Full Name	by name, address (phone number – option				
8.	Full Name	CITY			ZIP CODE A	
8.	Full Name	CITY		E 🛦	ZIP CODE A	
8.	Full Name	CITY A	STAT	E 🛦	ZIP CODE A	
 8. 9. 	Full Name	CITY A	STAT Telephone Number	E 🛦		nts
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	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main Name of Bank, Depository, etc.	CITY A	STAT Telephone Number	E 🛦		nts
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main Name of Bank, Depository, etc.	CITY A	STAT Telephone Number which the committee	E 🛦		nts

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or(h). Joint Fundra i	sing Participant:			
NEVADANS	FOR STEVEN HORSFORD	FEC ID	number	C00668228
KENDRA HO	DRN FOR CONGRESS	 FEC ID	number	C00648915
	FOR CONGRESS	 FEC ID	number	C00652248
	OR CONGRESS	FEC II	number (C00633859
Name of Any Connect	ed Organization, Affiliated Committee, Joint	Fundraising Rep	resentative,	or Leadership PAC Sponsor
Mailing Address				
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Designated Agent: Ide	ntify by name, address (phone number – option	nal)		
	ntify by name, address (phone number – option	nal)		
Full Name	ntify by name, address (phone number – option	nal)		
Full Name	ntify by name, address (phone number – option	nal)		
Full Name L	CITY		STATE A	ZIP CODE A
Full Name	CITY			ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depos safety deposit boxes or Name of Bank, Depository, etc.	CITY ▲ Sitories: List all banks or other depositories in	Telephone N	umber	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depos safety deposit boxes or Name of Bank,	CITY ▲ Sitories: List all banks or other depositories in	Telephone N	umber	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depos safety deposit boxes or Name of Bank, Depository, etc.	CITY ▲ Sitories: List all banks or other depositories in	Telephone N	umber	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depos safety deposit boxes or Name of Bank, Depository, etc.	CITY ▲ Sitories: List all banks or other depositories in	Telephone N	umber	

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

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g) or (h). Joint Fund r	raising Participant:				
BRINDISI F	FOR CONGRESS	S	FEC II	0 number	C C00648725
SUSAN WI	LD FOR CONGR	RESS	FEC II	0 number	C C00658567
	IINGHAM FOR C	ONGRESS	 FEC II	O number	C C00650507
	I PANNILL FLETC	HER FOR CONGRESS	FEC II	0 number	C C00640045
Name of Any Conne	ected Organization, A	Affiliated Committee, Joint	Fundraising Re	oresentative	, or Leadership PAC Sponsor
Mailing Address					
Relationship:		CITY A		STATE A	ZIP CODE ▲
Designated Agent: Id	dentify by name, addr	ress (phone number – optio	nal)		
	dentify by name, addr	ress (phone number – optio	nal)		
Full Name	dentify by name, addr	ress (phone number – optio	nal)		
Full Name	dentify by name, addr	ress (phone number – optio	nal)		
Full Name		ress (phone number – optio		STATE A	ZIP CODE A
Full Name L					ZIP CODE A
Full Name Mailing Address TITLE OR POSIT	TION ▼	CITY A	Telephone N	umber	ZIP CODE Tunds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITE Banks or Other Depresafety deposit boxes of Name of Bank,	TION ▼ ositories: List all bar or maintains funds.	CITY A	Telephone N	umber	
Full Name Mailing Address TITLE OR POSITE Banks or Other Depresafety deposit boxes of Name of Bank, Depository, etc.	TION ▼ ositories: List all bar or maintains funds.	CITY A	Telephone N	umber	
Full Name Mailing Address TITLE OR POSITE Banks or Other Depresafety deposit boxes of Name of Bank, Depository, etc.	TION ▼ ositories: List all bar or maintains funds.	CITY A	Telephone N	umber	

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

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1. COLIN ALLRE	D FOR CONGRESS	FEC ID number	C C00637868
SPANBERGE	R FOR CONGRESS	FEC ID number	C C00649913
3. HITA HART FO	OR IOWA	FEC ID number	C C00706457
4. BETSY DIRKS	EN LONDRIGAN FOR CONGRESS	FEC ID number	C C00649483
Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representati	ve, or Leadership PAC Spons
Mailing Address			
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Joint Fundraising Represer	
	fy by name, address (phone number – option		Leadership PAC Spo
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi	fy by name, address (phone number – option		ZIP CODE A
Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – option	nal)	
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5(a) c	or(h). Joint Fundraisi	ng Participant:		
- (3) -		DON FOR CONGRESS	FEC ID number	C C00706549
	DEPASQUALE	FOR PA 10	FEC ID number	C C00710533
	SRI FOR CON	GRESS	FEC ID number	C C00662874
	4		FEC ID number	C
6.	Name of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representativ	re, or Leadership PAC Sponsor
	Mailing Address			
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connecte	ed Organization Affiliated Committee Jo	int Fundraising Represent	tative Leadership PAC Sponsor
8.	Designated Agent: Identif	fy by name, address (phone number - optional)		
8.	Designated Agent: Identif	fy by name, address (phone number – optional)		
8.		fy by name, address (phone number – optional)		
8.	Full Name	fy by name, address (phone number – optional)		
8.	Full Name	fy by name, address (phone number – optional)		
8.	Full Name L L L L L L L L L L L L L L L L L L L	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
	Full Name _ _ Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ pries: List all banks or other depositories in which	STATE ▲ Telephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m	CITY ▲ CITY ▲ pries: List all banks or other depositories in which	STATE ▲ Telephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank,	CITY ▲ CITY ▲ pries: List all banks or other depositories in which	STATE ▲ Telephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which	STATE ▲ Telephone Number	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which	STATE ▲ Telephone Number	