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. Give Them The Boot PAC 722 Dulaney Valley Rd. ADDRESS (number and street) Ste. 357 (Check if address is changed) Towson 21204 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS helpus@givethemtheboot.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.givethemtheboot.org (Check if address is changed) DATE 2021 C00766113 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. Kosak, David, , , Type or Print Name of Treasurer Kosak, David, , , [Electronically Filed] 03 05 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

FI	FC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	1 4go 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 Candi			
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)		· · · · · · · · · · · · · · · · · · ·	(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	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)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate se 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.)	
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.	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.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revise	ed 02/2009)	Page 3
Write or Type Committee Na	ame	
Give Them Th	ne Boot PAC	
6. Name of Any Connecte	d Organization, Affiliated Committee, Joint Fundraising Representat	tive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	E ZIP CODE
	dentify by name, address (phone number optional) and position of the	
	Decid.	
Full Name	David, , ,	
Mailing Address	722 Dulaney Valley Rd.	
	Ste. 357	
	Towson	21204
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the commit g., assistant treasurer).	ttee; and the name and address of
Full Name Kosak, of Treasurer	David, , ,	
Mailing Address	722 Dulaney Valley Rd.	
	Ste. 357	
	Towson	21204
Title or Position Treasurer	CITY STATE Telephone number	ZIP CODE

I LO I OII	m 1 (Revised 02/2009)	Page 4
	III 1 (NOVISCU 02/2000)	i aye 🕶
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
Banks or Other safety deposit be Name of Bank,	r Depositories: List all banks or other depositories in which the committee deposits funds, ho oxes or maintains funds. Depository, etc.	olds accounts, rents
Mailing Address	Bank of America	
Mailing Address	,100 N Tryon St	
Mailing Address	,100 N Tryon St	2
Mailing Address	100 N Tryon St	ZIP CODE
Mailing Address Name of Bank,	Charlotte CITY STATE	
	Charlotte CITY STATE	ZIP CODE
	Charlotte CITY STATE Depository, etc.	ZIP CODE
Name of Bank,	Charlotte CITY STATE Depository, etc.	ZIP CODE
Name of Bank,	Charlotte CITY STATE Depository, etc.	ZIP CODE