PAGE 1 / 15

FEC FORM 1		STATEMEN ORGANIZA		C	PAGE 1 / 15
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Arizona De	mocrat	c Party			
ADDRESS (number a	nd street)	PO Box 36123			
(Check if a is changed					
		Phoenix CITY		AZ 85 STATE ▲	2067 ZIP CODE ▲
COMMITTEE'S E-MA	AIL ADDRESS	3			
(Check if a is changed		Darryl@CommonCents	sConsulting.net		
		Optional Second E-Mail Add Jeremie@CommonC	dress CentsConsulting.net		
COMMITTEE'S WEB (Check if a is changed	address	RESS (URL) www.AZDem.org			
2. DATE 03	M / D D D 11	2022			
3. FEC IDENTIFIC	CATION NUM	IBER ▶ C co	00166710		
4. IS THIS STATEM	MENT	NEW (N) OR	x AMENDED (A)		
I certify that I have e	examined this	Statement and to the best	of my knowledge and belief it i	s true, correct and	d complete.
Type or Print Name	of Treasurer	McGuire, Rick, , ,			
Signature of Treasure	er <i>McGuire</i> ———	, Rick, , ,	[Electronically Filed]	Date 09	06 / 2022
NOTE: Submission of			may subject the person signing th		penalties of 52 U.S.C. §30109
Office Use Only			For further information con Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 03/2022)	Page 2
. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee	ee. (Complete the candidate information below.)
(b) This committee is an authorized committee, and information below.)	d is NOT a principal campaign committee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought:	House Senate President District
(c) This committee supports/opposes only one cand	didate, and is NOT an authorized committee.
Name of Candidate	
Party Committee:	
(National,	State (Democratic, inate) committee of the DEM Republican, etc.) Party
or casera.	Tiopasiouri, cic./ rarty
Political 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
	Trade Association Cooperative
In addition, this committee is a Lobbyi	
(f) This committee supports/opposes more than one committee. (i.e., nonconnected committee)	ne Federal candidate, and is NOT a separate segregated fund or party
In addition, this committee is a Lobbyi	ist/Registrant PAC.
In addition, this committee is a Leader	ership PAC. (Identify sponsor on line 6.)
(g) This committee is an independent expenditure-o	only political committee (Super PAC).
In addition, this committee is a Lobbyi	
	th contribution and non-contribution accounts (Hybrid PAC).
In addition, this committee is a Lobbyi	ISV MEGISTRANT PAC.
Joint Fundraising Representative:	
This committee collects contributions, pays fund	Iraising expenses and disburses net proceeds for two or more political
(1)	is an authorized committee of a federal candidate.
(j) This committee collects contributions, pays fund committees/organizations, none of which is an a	draising expenses and disburses net proceeds for two or more political authorized committee of a federal candidate.
Committees Participating in Joint Fundraiser	
1.	C

	FEC Form 1 (Revise	ed 02/2009)	Page 3
W	/rite or Type Committee Na		
 6.	Arizona Dem	OCTATIC Party d Organization, Affiliated Committee, Joint Fundraising Representati	vo. or Londorphin DAC Spanoor
0.	=	rporation / Democratic National Committee	ve, or Leadership PAC Sponsor
	Mailing Address	Victory Fund	
	-	430 S Capitol Street, SE	
		Washington DC	20003
		OITY A	710 0005 4
		CITY ▲ STATE	
	Relationship: Connec	eted Organization Affiliated Organization Joint Fundraising Representation	entative Leadership PAC Sponso
7.	Custodian of Records: Id books and records.	lentify by name, address (phone number optional) and position of the per	rson in possession of committee
	Tattrie,	Darryl, R, ,	
	ruii Name	₁ 2910 North Central Ave.	
	Mailing Address	2910 Notul Central Ave.	
		Phoenix	85012
		CITY ▲ STATE	▲ ZIP CODE ▲
	Title or Position ▼	- · · · · · · · · · · · · · · · · · · ·	
	Consultant	Telephone number	602 - 298 - 4200
		, and the second	
8.		and address (phone number optional) of the treasurer of the commit	tee; and the name and address of
	any designated agent (e.g	g., assistant treasurer).	
	Full Name McGuire	e, Rick, , ,	
	of Treasurer		
	Mailing Address	2910 North Central Ave.	
		Phoenix AZ	85012
		CITY ▲ STATE	▲ ZIP CODE ▲
	Title or Position ▼	STATE STATE	_ ZII GODE =
	Treasurer	Telephone number	602 298 4200

	FEC Form 1	(Revised 02/2009)		Page 4
	Full Name of Designated Agent	Kennedy, Judy, , ,		
	Mailing Address	2910 North Central Ave.		
		Phoenix	AZ	85012
	Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
	Assistant Treasur	er 	e number	602 - 298 - 4200
		Depositories: List all banks or other depositories in which the comes or maintains funds.	nmittee deposits	funds, holds accounts, rents
ı	Name of Bank, D	epository, etc.		
		Wells Fargo, NA		
I	Mailing Address	PO Box 63020		
		San Francisco	CA	94163
		CITY ▲	STATE ▲	ZIP CODE ▲
ı	Name of Bank, D	epository, etc.		
		Amalgamated Bank		
ı	Mailing Address	275 Seventh Ave		
		New York	L NY	10011
		CITY ▲	STATE ▲	ZIP CODE ▲

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

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

h). Joint Fundraisi	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
		FEC ID number	С
4.			
ame of Any Connected	d Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spon
Democratic Gras	sroots Victory Fund		
	430 South Capitol Street SE		
Mailing Address	450 Godin Gaptor Greet GE		
	Washington	DC	20003
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	oint Fundraising Representa	ative Leadership PAC S
E. II Name			
Full Name			
Mailing Address			
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A		
Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mail and the control of the co	CITY A ories: List all banks or other depositories in which anintains funds.	STATE ▲ Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank, Centr	CITY ▲ ories: List all banks or other depositories in which an aintains funds. al Bank	STATE ▲ Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank, Centr	CITY A ories: List all banks or other depositories in which anintains funds.	STATE ▲ Telephone Number	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
MARK KELLY VIC	CTORY FUND		
Mailing Address	3104 E CAMELBACK RD		
	#924		
	PHOENIX	, , , AZ	85016
Relationship:	CITY A	STATE A	ZIP CODE ▲
		t Fundraising Representa	Zuvo Zoddoromp 1710 op
	by name, address (phone number - optional)	. Tanasacing Topicocin	ative Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY	STATE A	
Full Name	CITY A		
Full Name	CITY A	STATE A	
Full Name Mailing Address TITLE OR POSITION Lianks or Other Depositor afety deposit boxes or mailane of Bank, depository, etc.	CITY A Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Lianks or Other Depositor afety deposit boxes or mailane of Bank, depository, etc.	CITY A Tes: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Mailing Address TITLE OR POSITION	▼ wries: List all banks	CITY cor other depositories in with the second control of the se	Telephone No		ZIP CODE ZIP CODE s funds, holds accounts, rent
Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	▼ wries: List all banks	CITY A	Telephone No	umber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or main arms of Bank,	▼ wries: List all banks	CITY A	Telephone No	umber	ZIP CODE A
Mailing Address TITLE OR POSITION	▼ wries: List all banks	CITY A	Telephone No	umber	ZIP CODE A
Mailing Address TITLE OR POSITION	▼	CITY A	Telephone No	umber	ZIP CODE A
Mailing Address			· · · · · · · · · · · · · · · · · · ·		
Mailing Address				STATE A	
Full Name					
	d Organization y by name, addres	Affiliated Committee	Joint Fundraising	Hepresenta	ative Leadership PAC Sp
Relationship:	LEXINOTON	CITY A		STATE A	ZIP CODE A
	LEXINGTON			, KY ,	40588
Mailing Address					
Mailies Add	PO BOX 9				
ame of Any Connected BATTLEGROUNI			undraising Rep	resentative	e, or Leadership PAC Spons
4.			_ FEC ID	number	С
~			_ FEC ID	number	С
3.			FEC ID	number	C
1			_		

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

h). Joint Fundraisin		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spon
STANTON VICTO	PRY FUND		
Mailing Address	910 17TH STREET, NW		
	SUITE 925		
	WASHINGTON	DC	20006
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC S
	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

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

g) or (h). Joint Fundra	aising Participant:		
1		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
=	eted Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Sponsor
DOLLARS FOR	R DEMOCRATS		
Mailing Address	430 SOUTH CAPITOL, NE		
	SUITE 300		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
riolationionip.	OII I		
Conn	ected Organization Affiliated Committee X Join	t Fundraising Represent	ative Leadership PAC Sponso
Conn			ative Leadership PAC Sponso
Designated Agent: Ide	ected Organization Affiliated Committee X Join		ative Leadership PAC Sponso
Designated Agent: Ide	ected Organization Affiliated Committee X Join		ative Leadership PAC Sponso
Designated Agent: Ide	ected Organization Affiliated Committee X Join	t Fundraising Represent	ative Leadership PAC Sponso
Designated Agent: Ide	ected Organization Affiliated Committee Join entify by name, address (phone number – optional)	t Fundraising Represent	
Designated Agent: Ide Full Name Mailing Address	ected Organization Affiliated Committee Join Join entify by name, address (phone number – optional) CITY CITY	t Fundraising Represent	
Designated Agent: Idea Full Name Mailing Address TITLE OR POSIT Banks or Other Deposafety deposit boxes of Name of Bank,	ected Organization Affiliated Committee Join entify by name, address (phone number – optional) CITY A estitories: List all banks or other depositories in which	STATE A	ZIP CODE A
Designated Agent: Ide Full Name Mailing Address TITLE OR POSIT Banks or Other Depo safety deposit boxes of Name of Bank, Depository, etc.	ected Organization Affiliated Committee Join Join Pentify by name, address (phone number – optional) CITY A Positories: List all banks or other depositories in which r maintains funds.	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:			
1.		FEC ID	number	С
2.		FEC ID	number	С
3.		FEC ID	number	С
4.		FEC ID	number	С
	Organization, Affiliated Committee, Joint	Fundraising Rep	esentativ	e, or Leadership PAC Spon
BATTLEGROUN	D SOUTH			
Mailing Address	600 PENNSYLVANIA AVE SE #15180			
	WASHINGTON		DC	20003
Relationship:	OITV.		STATE A	ZIP CODE ▲
	CITY ▲	1		П
Connecte	ed Organization Affiliated Committee	Joint Fundraising	Represent	ative Leadership PAC S
Connecte			Represent	ative Leadership PAC S
Connecte	ed Organization Affiliated Committee		Represent	ative Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee		Represent	ative Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee	nal)	Represent	ative Leadership PAC S
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee Ty by name, address (phone number – option	nal)		
esignated Agent: Identi	Affiliated Committee Ty by name, address (phone number – option	nal)	TATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and	Affiliated Committee fy by name, address (phone number – option CITY CITY CITY Dries: List all banks or other depositories in the second committee Affiliated Committee Aff	Telephone Nu	TATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee fy by name, address (phone number – option CITY CITY CITY Dries: List all banks or other depositories in the second committee Affiliated Committee Aff	Telephone Nu	TATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee fy by name, address (phone number – option CITY CITY CITY Dries: List all banks or other depositories in the second committee Affiliated Committee Aff	Telephone Nu	TATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Mailing Address					
ame of Bank, epository, etc.					
anks or Other Deposito afety deposit boxes or ma	ries: List all banks aintains funds.	or other depositories in v	hich the commit	tee deposit	s funds, holds accounts, ren
			Telephone No	umber	
TITLE OR POSITION	▼	CITY ▲		STATE A	ZIP CODE ▲
Mailing Address					
Full Name					
	d Organization	Affiliated Committee s (phone number – option	Joint Fundraising	Representa	Leadership PAC S
Relationship:		CITY ▲	 _	STATE A	ZIP CODE ▲
Polotionchin	LAFAYETTE	OITY :		LA CTATE A	70506
	1.450./5775				70500
Mailing Address	114 BEAUCHAN	MP LANE			
ame of Any Connected FRIENDS OF STA			Fundraising Rep	resentativ	e, or Leadership PAC Spon
4				Tumbor	0
3.			_	number	C
2.			_	number	C
1			, FEO ID	number	

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

h). Joint Fundraisi	1	FFO ID	С
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
O'HALLERAN VI	CTORY FUND 2022		
Mailing Address	PO BOX 313		
	MARICOPA	AZ	85139
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identing Full Name	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identi	by by name, address (phone number – optional) CITY		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

n). Joint Fundraising			1	FF0 :-			
1.					number	C	
2.				FEC ID	number	С	
3				FEC ID	number	C	
4.				FEC ID	number	C	
ame of Any Connected (e, Joint Fund	raising Rep	resentative	e, or Lead	dership PAC Sp
GRANITE CANYO	N COMMITT	EE					
Mailing Address	600 PENNSYLV	ANIA AVE SE					
	#15180						
	WASHINGTON			, , I	DC	200	03
Relationship:		CITY ▲			STATE A		ZIP CODE 4
	Organization	Affiliated Commit	tee X Join	nt Fundraising	Representa	ative	Leadership PAC
Connected esignated Agent: Identify				nt Fundraising	Representa	ative	Leadership PAC
Connected esignated Agent: Identify Full Name				nt Fundraising	Representa	ative	Leadership PAC
Connected esignated Agent: Identify				t Fundraising	Representa	ative	Leadership PAC
Connected esignated Agent: Identify Full Name				t Fundraising	Representa	ative	Leadership PAC
Connected esignated Agent: Identify Full Name	by name, address	s (phone number	- optional)				
Connected esignated Agent: Identify Full Name	by name, address	s (phone number	- optional)		Representa		
Connected esignated Agent: Identify Full Name Mailing Address	by name, address	s (phone number	- optional)		STATE A		
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositorifety deposit boxes or main	by name, address	city 🛦	- optional)	Selephone Nu	STATE A		ZIP CODE A
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connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or mail ame of Bank, epository, etc.	by name, address	city 🛦	- optional)	Selephone Nu	STATE A		ZIP CODE A

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

FEC Form 1S (Revised 02/2017) for

Banks safety Name	TLE OR POSITION or Other Depositor deposit boxes or ma of Bank, tory, etc. Mailing Address	ries: List all banks	CITY A or other depositories in v	Telephone Nu		s funds, hol	ZIP CODE A dds accounts, r	ents
Banks safety Name	or Other Depositor deposit boxes or ma of Bank, tory, etc.	ries: List all banks		Telephone Nu	mber			ents
Banks safety Name	or Other Depositor deposit boxes or ma of Bank, tory, etc.	ries: List all banks		Telephone Nu	mber			ents
Banks safety Name	or Other Depositor deposit boxes or ma of Bank, tory, etc.	ries: List all banks		Telephone Nu	mber			ents
Banks safety	TLE OR POSITION or Other Depositor deposit boxes or ma	ries: List all banks		Telephone Nu	mber			ents
		▼	CITY A				ZIP CODE A	
		■	CITY A	<u> </u>	STATE A		ZIP CODE A	
Ма	illing Address							
Ма	illing Address							
Ма	iling Address							
		1						
Ful	I Name							
Design		Organization by name, address	Affiliated Committee	Joint Fundraising	Representa	ative L	_eadership PAC	Sponsor
F	Relationship:		CITY A		STATE A		ZIP CODE	
		TUCSON			AZ	85717		
N	Mailing Address	PO BOX 40721						
	of Any Connected		liated Committee, Joint I UND	Fundraising Rep	resentative	e, or Leade	rship PAC Sp	onsor
4.					number			
					number number	C		
3.					number	C		
				_	number	C		
3.								

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

h). Joint Fundrais i	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
JEVIN HODGE \	/ICTORY FUND		
Mailing Address	PO BOX 4981		
Ü			
	SCOTTSDALE	AZ	85261
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
	Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A