Only

STATEMENT OF

PAGE 1 / 5 =

FORM 1		O	RGAN	IZA	TIC	N								<i></i>					
1. NAME OF COMMITTEE (ir	full)		Check if name changed)	e		nple:If		type		12	FE	4 M 5		ffice (Jse O	nly			_
Leading Ped	•			1 1	Ovei		35.												
	1 1 1			1 1		1 1			1 1				1 1		1 1			1 1	_
		600 Penn	sylvania Ave \$	SE															
ADDRESS (number a	,	#15180																	
X ◀ (Check if a is changed																			╛
		Washingt CI7	on ΓΥ ▲							L ^D ST/	C ATE	A	200	003	Z	- IP C	DDE 🛦		
COMMITTEE'S E-MA	AIL ADDR	ESS																	
X ◀ (Check if a is changed		fec@cap	ocompliance.c	om															
		Optional S	Second E-Ma	ail Addre	ess														
																			╛
COMMITTEE'S WEB (Check if a is changed)	address	DDRESS (UF	RL)																
2. DATE 0	9 / 0		2024																
3. FEC IDENTIFIC	CATION N	NUMBER >	C	C007	765198														
4. IS THIS STATE	MENT	NEW	(N) O	R	×	ΑN	1ENDE	ED (A	.)										
certify that I have e	examined	this Statemer	nt and to the	best of	my kr	nowled	ge and	d belie	ef it i	s tru	e, co	orrec	t and	l con	nplete	€.			
Type or Print Name	of Treasur	er <u>Nissen, N</u>	Melissa, , ,																
Signature of Treasure	er Nis	sen, Melissa, ,	,							Date		M 09	M /	D	09	/	y y 202		Y
NOTE: Submission of	false, erro		mplete inform											pena	alties	of 52	U.S.C	 3. §30	109.
Office Use						For furt Federal Toll Free	Election	Comr	nissio							OR d 06/2	M 1		_

Toll Free 800-424-9530

Local 202-694-1100

C Form 1	(Revised 03/2022)	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 information below.)	e the candidate
Name of Candida		
Candida Party A		State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
, n	ommittee: This committee is a (National, State (Democ	ratic,
(d)	or subordinate) committee of the Republic	can, etc.) Party
(e) (f) X		or Organization perative
	In addition, this committee is a Lobbyist/Registrant PAC. In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g)	This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
(h)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid In addition, this committee is a Lobbyist/Registrant PAC.	d PAC).
Joint Fu	Indraising Representative:	
(i)	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
(j)	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
Comm	nittees Participating in Joint Fundraiser	
1.	C	

С

	FEC Form 1 (Revised 02	2/2009)	Page 3
V	/rite or Type Committee Name		
	Leading People I		Londovskin DAC Spansov
6.	Fletcher, Elizabeth, ,	ganization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
		<u> </u>	
	Mailing Address	3262 Westheimer Rd	
		Houston	77098
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative	
		J. J	2 Zadasamp () to oponiosi
	October 15 con of December 14 cett		
7.	books and records.	fy by name, address (phone number optional) and position of the person in	possession of committee
	Nissen, Me	issa	
	Full Name		
	Mailing Address	600 Pennsylvania Ave SE	
		#15180	
		Washington	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	STATE =	ZII CODL =
	Treasurer		2 - 544 - 6960
		leiephone number	
8.		address (phone number optional) of the treasurer of the committee; ar	nd the name and address of
	any designated agent (e.g., a	ssistant neasurer).	
	Full Name Nissen, Me of Treasurer	issa, , ,	
	Mailing Address	600 Pennsylvania Ave SE	
	Mailing Address	ı#15180	
		ıWashington	20003
		Washington DC	20003
	Title on Decition —	CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼ Treasurer		2 544 6960
	116434161	202 	2 - 544 - 6960

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
Title of Position		
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits f xes or maintains funds.	unds, holds accounts, rents
Name of Bank, D	Depository, etc.	
	Amalgamated Bank	
Mailing Address	275 Seventh Ave	
	New York	10001
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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1.						
1				FEC	ID number	C
2. 🔟				FEC	ID number	С
3. 🔟				FEC	ID number	С
4. 🖳				FEC	ID number	С
Name of A	Any Connected	Organization, Af	filiated Committee, Joint	Fundraising R	epresentativ	e, or Leadership PAC Spons
Friend	s of Lizzie Flet	cher				
Mail	ing Address	PO Box 33079	, <u> </u>			
		Washington	<u> </u>		DC	20033
			CITY A		STATE ▲	ZIP CODE ▲
Designate	ed Agent: Identify	d Organization	-	≺ Joint Fundraisi	ng Represent	tative Leadership PAC Sp
Designate Full Na	Connected ed Agent: Identify ame		Affiliated Committee		ng Represent	Leadership PAC Sp
Designate Full Na	Connected Agent: Identify		Affiliated Committee		ng Represent	Leadership PAC Sp
Designate Full Na	Connected ed Agent: Identify ame		Affiliated Committee		ng Represent	Leadership PAC Sp
Designate Full Na Mailing	Connected and Agent: Identify ame	by name, addres	Affiliated Committee			
Designate Full Na Mailing	Connected ed Agent: Identify ame	by name, addres	Affiliated Committee		STATE A	Leadership PAC Sp