**FEC** 

Only

# STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Stop These Oppressive People: Tyrants Racists Unqualifieds Misogynists Propagandists (STOP TRUMP) PO Box 5326 ADDRESS (number and street) (Check if address is changed) Evanston 60204 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address harry@turnoutpac.org is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) stopdonaldtrump.org (Check if address is changed) DATE 2025 C00847673 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. Type or Print Name of Treasurer Pascal, Harry,, 03 23 2025 Signature of Treasurer Pascal, Harry, , , Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

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EC Form 1	(Revised 03/2022)		Page <b>2</b>
TYPE O	F COMMITTEE:		
Candid	ate Committee:		
(a)	This committee is a principal campa	ign committee. (Complete the candidate info	ormation below.)
(b)	This committee is an authorized cominformation below.)	nmittee, and is NOT a principal campaign c	ommittee. (Complete the candidate
Name Candid			
Candid Party <i>i</i>	late Offic Affiliation Sou		State President District
(c)	This committee supports/opposes on	nly one candidate, and is NOT an authorize	
Nam Cand	e of lidate		
Party C	committee:		
(d)	This committee is a	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Politica	I Action Committee (PAC):		
(e)		ated fund. (Identify connected organization	on line 6.) Its connected organization is a:
		0	
	Corporation  Membership Organization	Corporation w/o Capital Stock	Labor Organization
		Trade Association is a Lobbyist/Registrant PAC.	Cooperative
(f)	This committee supports/opposes mo committee. (i.e., nonconnected comm	ore than one Federal candidate, and is NO nittee)	Γ a separate segregated 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.)
(g)	This committee is an independent ex	xpenditure-only political committee (Super P	AC).
	In addition, this committee	is a Lobbyist/Registrant PAC.	
(h) X	This committee is a political committee	ee with both contribution and non-contributi	on accounts (Hybrid PAC).
	In addition, this committee	is a Lobbyist/Registrant PAC.	
Joint F	undraising Representative:		
(i)		s, pays fundraising expenses and disburses ne of which is an authorized committee of a	•
(j)		s, pays fundraising expenses and disburses hich is an authorized committee of a federa	•
Com	mittees Participating in Joint Fundrai	ser	
1.			C

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	FEC Form 1 (Revised 0)	2/2009)	Page <b>3</b>
W	/rite or Type Committee Name		
	Stop These Oppressive	People: Tyrants Racists Unqualifieds Misogynists Propagandi	sts (STOP TRUMP)
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
	PROGRESSIVE TUR	NOUT PROJECT	
	Mailing Address	PO BOX 5327	
		EVANSTON	60204
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponsor
7.	Custodian of Records: Identification books and records.	y by name, address (phone number optional) and position of the person in po	ossession of committee
	Pascal, Har	ry, , ,	
	Full Name		
	Mailing Address	PO Box 5326	
		Evanston IL 6	60204
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	4353
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and ssistant treasurer).	the name and address of
	Full Name Pascal, Har of Treasurer	ry, , ,	1
	Mailing Address	PO Box 5326	
	Mailing Addiess		
		Evanston , , IL , , 6	60204
			10204
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	Treasurer	331 Telephone number	-  223  -  4353

FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent			
Mailing Address			
		ГЕ ▲	ZIP CODE ▲
Title or Position	•		
	Telephone number		
safety deposit bo	Depositories: List all banks or other depositories in which the committee depositories or maintains funds.	posits funds, hold	ds accounts, rents
Name of Bank, D	epository, etc.		
	CIBC		
Mailing Address	120 S LaSalle St		
	Chicago	60602	
	CITY ▲ STAT	E 🛦	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Amalgamated Bank		
Mailing Address	1825 K St NW		
	Washington	C 20006	
	CITY ▲ STAT	E 🛦	ZIP CODE ▲

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	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ama of Any Connecto	d Organization, Affiliated Committee, Joint Fun	dvaicing Denverontativ	o or Londovskip DAC Spon
PROGRESSIVE TA		uraising Representativ	e, or Leadership PAC Spon
Mailing Address	PO BOX 5308		
	EVANSTON	, , , , , , , , , , , , , , , , , , ,	60204
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee Jo	int Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	Leadership PAC Sp
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esignated Agent: Ident		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITIO	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank,	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which anintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which anintains funds.	STATE A  Telephone Number	ZIP CODE A
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lame of	Any Connected	Organization Affili	ated Committee, Joint	Fundraising Re	nresentativ	e or Leadershin PAC	Snons
	REPUBLICANS	_					
Mai	iling Address	PO BOX 5326					
		EVANSTON			L L	60204	
Dal	ationship:		CITY A		STATE A	ZIP COD	E 🛦
			Affiliated Committee  (phone number – option	Joint Fundraisin	g Representa	ative Leadership	PAC Sp
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(h). <b>Joint Fundraisi</b>	ng Farticipant.		
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TURNOUT THE VO	I Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 5327		
	EVANSTON		60204
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee Joint Joi	oint Fundraising Represent	ative Leadership PAC Spo
		oint Fundraising Represent	Leadership PAC Spo
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esignated Agent: Identi	fy by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Spo
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Full Name  Mailing Address  TITLE OR POSITION  Canks or Other Deposite afety deposit boxes or make the property of the property of the position of the property of the position of the property of the propert	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white inintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Lanks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white inintains funds.	STATE A  Telephone Number	ZIP CODE A
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	TURNOUT 2024	_					
Ма	iling Address	PO BOX 5327					
		EVANSTON	1 1 1 1 1 1 1		L IL	60204	
Re	lationship:		CITY A		STATE A	ZIP CODE	<b>A</b>
esignat			Affiliated Committee  (phone number – option	Joint Fundraisin	9 17 11 11		
Full 1	ed Agent: Identify						
Full 1	red Agent: Identify						C Sp
Full 1	red Agent: Identify						
Full Mailin	red Agent: Identify	by name, address			STATE A	ZIP CODE A	

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1. 2. 3. 4. 4. Any Connected Orgon Dem Turnout 2026  Mailing Address  Relationship:  Connected O	PO Box 5327  Evanston  CITY		FEC ID number FEC ID number FEC ID number FEC ID number sing Representative	C C C c, or Leadership PAC Spon
3. 4. A.	PO Box 5327  Evanston  CITY		FEC ID number  FEC ID number  sing Representative	C C Spon Se, or Leadership PAC Spon 60204
4. Dem Turnout 2026  Mailing Address  Relationship:	PO Box 5327  Evanston  CITY		FEC ID number	e, or Leadership PAC Spon
Dem Turnout 2026  Mailing Address  Relationship:	PO Box 5327  Evanston  CITY		sing Representative	e, or Leadership PAC Spon
Dem Turnout 2026  Mailing Address  Relationship:	PO Box 5327  Evanston  CITY			60204
Dem Turnout 2026  Mailing Address  Relationship:	PO Box 5327  Evanston  CITY			60204
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TITLE OR POSITION ▼	CITY A		STATE ▲	ZIP CODE ▲
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Banks or Other Depositories afety deposit boxes or maintable dame of Bank, Depository, etc.  Mailing Address	iins funds.			s funds, holds accounts, ren
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## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Mai	iling Address	PO BOX 5327					
		EVANSTON			L L	60204	
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