2022 - 12 - 01 - 0M - 00427M54

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAILCENTER

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1. NAME OF COMMITTEE (in	full)		(Check if name is changed)		mple:If typing r the lines.	ı, type	12F	Ė4M	15]		
EXCELLENGEIN	ıHĘALT	HÇARE	EQUÇATION PA	.С _{II}									
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ADDRESS (number a	nd street)	5830	<u> W ТНЦИФЕРВІ</u>	RP RD									
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COMMITTEE'S E-MA	AIL ADDR	ESS											
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			ial Second E-Mail A yn@midwestern		<u> </u>				لمات	, .1 1	<u>.</u>	<u>J. T</u>	لــــا
			•						-		:		
COMMITTEE'S WEB	PAGE A	DDRESS	(URL)			•				•			
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2. DATE 11	ر 26	2	022										
3. FEC IDENTIFIC	CATION N	NUMBER	► Co	0433904									
4. IS THIS STATES	MENT [NE	EW (N) OR	<u></u>	AMEND	DED (A)	·					_	:-
I certify that I have e	examined	this State	ment and to the be	est of my	knowledge ar	nd belief it	is true,	corre	ect and	d comp	lete.		
Type or Print Name	of Treasur	er <u>G</u> ı	regory Lewis O'C	Coyne									
Signature of Treasure	er	人	~ O'S				Date	11	M	26	0 /	20 <u>2</u> 2	
NOTE: Submission of	false, erro		incomplete information							penalt	ies of 5	52 U.S.	.C. §30109.
Office Use			.:}		For further in Federal Election	on Commissio		*****			FO		_

Joint Fundraising Representative:

	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political
	committees/organizations, at least one of which is an authorized committee of a federal candidate.

This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

This committee is an independent expenditure-only political committee (Super PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Lobbyist/Registrant PAC.

(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees	s Part	icipati	ing in	ı Join	it Fur	drais	er			
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(g)

(h)

W	rite or Type Committe	e Name						_			
).	Name of Any Conn	ected Organizat	ion, Affiliated	Committee,	Joint	Fundraising	Represe	entative, o	r Leaders	hip PAC S	ponsor
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				111	<u> </u>		سلا		111		
	Mailing Address	ـــــا		 	لــــــــــــــــــــــــــــــــــــــ						
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				CITY ▲			S	TATE A		ZIP CODE	≣ ▲
	Relationship: C	onnected Organiza	ation Affilia	ated Organiza	tion	Joint Fun	draising R	epresentativ	ve 🔲	Leadership	PAC Spons
<u>'</u> .	Custodian of Recorbooks and records.	ds: Identify by na	me, address (p	phone numbe	r opti	onal) and po	sition of t	ne person i	n possess	ion of comr	mittee
	Full Name	<u> </u>			<u></u>	<u> </u>					
	Mailing Address	ـــا			Щ.	111				<u> </u>	
		ــــا			اللل						
		لللا			<u> </u>		ا ل		لــــــــــــــــــــــــــــــــــــــ		
	Title or Position —			CITY A			s	TATE A		ZIP CODI	E 🛦
	Title or Position ▼										
						Telepho	ne numbe	er L			
3.	Treasurer: List the any designated age			nber option	nal) of t	he treasure	of the co	ommittee; a	and the n	ame and a	ddress of
	Full Name of Treasurer	Gregory Lewis	O'Çoyne ı	· 	<u></u>			<u> </u>	<u> </u>		
	Mailing Address	5830	W ТНЦИРЕ	RBIRD RE	<u>}</u>		<u> </u>				
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		GLE	NDALE _{I I}		للل			ΑZ	85306	ا-لىپ	4655 ₁
	Title or Position ▼			CITY ▲			S	TATE ▲		ZIP COD	E 🛦
	TREASURER			ш		Telepho	ne numb	er <u>[60</u> 2	<u>.</u>	<u> </u>	6036

_	FEC Form 1 (Revised ()3/2022)	·	Page 4
	Full Name of Designated Agent			
	Mailing Address			
	Title or Position ▼	CITY A	STATE ▲	ZIP CODE ▲
		Telephone r	number	
9.	Banks or Other Depositori safety deposit boxes or main	es: List all banks or other depositories in which the commitains funds.	nittee deposits funds, hold	s accounts, rents
	Name of Bank, Depository, e	etc.		
	Mailing Address			
•				
		CITY ▲	STATE ▲	ZIP CODE ▲
	Name of Bank, Depository,	∍tc.		
				
	Mailing Address			
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		CITY A	STATE A	ZIP CODE ▲

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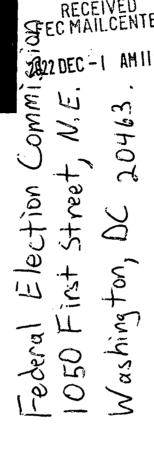
Optional Supplemental Information for Lines 5(i) or (j), 6, 8 and/or 9

Page ___ **of** ___

5(i) or (j)). Joint Fundraising	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
_	4.		FEC ID number	С
6. N	lame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address			
				
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee Joint	Fundraising Represent	ative Leadership PAC Sponsor
8. D e	esignated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address	<u> </u>		
	Walling Address			
			1 1 1	1 11
		CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	1	elephone Number	
Sá	Banks or Other Depositor afety deposit boxes or ma	ries: List all banks or other depositories in which iintains funds.	the committee deposit	ts funds, holds accounts, rents
D	Depository, etc.			
	Mailing Address			
				

SG30 W THUNDERBIRD RD SUTTE BS PMB 1136 CLENDALE, AZ SS306-4655 ETHE PAC

26 NOV 2022PM 5 L PHOENIX AZ 852



Federal Election Co ENVELOPE REPLACEMENT PAGE FC The FEC added this page to the end of this fil	R INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail Postmarked ///26/2	Date of Receipt 2 12/1/22
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registrati	Date of Receipt on Office
Received from Senate Public Records Office	Date of Receipt e
Received from Electronic Filing, Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
JAM PREPARER	12/1/22 DATE PREPARED
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