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STATEMENT OF
ORGANIZATION

FORM 1		ORGANIZ	ATION		
				(Office Use Only
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Maine Dem	ocratio	Party			
ADDRESS (number a	nd street)	PO Box 5258			
(Check if a is changed		320 Water St 3rd Floor			
J	,	Augusta │		ME 04 STATE ▲	330-5258
COMMITTEE'S E-MA	IL ADDRES	S			
(Check if a is changed		tara@CommonCentsC	Consulting.net		
		Optional Second E-Mail Add tgrose@mainedems.	dress org		
COMMITTEE'S WEB	address	RESS (URL)			
2. DATE 05	M / D 08	2023			
3. FEC IDENTIFIC	CATION NU	MBER ► C co	00179408		
4. IS THIS STATEN		NEW (N) OR	x AMENDED (A)		
I certify that I have e	examined this	s Statement and to the best	of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name of	of Treasurer	Johnson, Betty, , ,			
Signature of Treasure	er Johnson	n, Betty, , ,	[Electronically Filed]	Date 05	/ D D / Y Y Y Y 08 2023
NOTE: Submission of	false, erroned		may subject the person signing th		e penalties of 52 U.S.C. §30109
Office Use Only			For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC Form	1 (Revised 03/2022)	Page 2							
. TYPE C	DF COMMITTEE:								
Candio	date Committee:								
(a)	(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 the information below.)	ne candidate							
Name Candio									
Candio Party	date Affiliation Office Sought: House Senate President	State District							
(c)									
	ne of didate								
Party Committee: (National, State or subordinate) committee of the DEM (Democratic, Republican, etc.) Party									
Politica (e)	al Action Committee (PAC): This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:							
	Corporation Corporation w/o Capital Stock Labor C	Organization							
	Membership Organization Trade Association Cooperation	ative							
	In addition, this committee is a Lobbyist/Registrant PAC.								
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed 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 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 P	AC).							
	In addition, this committee is a Lobbyist/Registrant PAC.								

Joint Fundraising Representative:

(i) 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.
(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 Participating in Joint Fundraiser
2.

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Maine Democratic Party

6.	Name of Any Connected O	-								-	Rep	ore	sen	tat	ive,	01	Le	ade	ersl	nip	PAC	C S	pon	sor	
	DNC Services Corpo																								
	Mailing Address	Victory Fund																<u> </u>							
		430 S Capitol St	treet, SE						I																
		Washington												C			20	0003	3			- L			
				CITY								:	STA	ΤE						ZIP	СС	DE			
	Relationship: Connected	Organization	Affiliate	d Orga	anizati	on	×	Joir	nt Fu	undr	aisi	ng	Rep	ores	enta	ativ	e	C	ļ	ead	ersł	nip F	PAC	Spo	nsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Johnson, E	Setty, , ,			
Full Name				
Mailing Address	16 Winthrop St.			
	Augusta			80-5258
	CITY 🔺		STATE A	ZIP CODE
Title or Position ▼				
Treasurer		Telephone nu	ımber 207 –	622 - 6233

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Johnson, Betty, , ,
of Treasurer	
Mailing Address	16 Winthrop St.
	Augusta ME 04330-5258
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Treasurer	Telephone number 207 - 622 - 6233

FEC Form 1 (Revised 02	2/2009)	Page 4
Full Name of Designated Agent]
Mailing Address		
	CITY ▲ STAT	TE A ZIP CODE A
Title or Position ▼		
	Telephone number	

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

	TD Bank	<u> </u>	
Mailing Address	101 Western Avenue		
	Augusta	ME 04330	
		STATE A	ZIP CODE
Name of Bank, Do	epository, etc. Bank of America		
Mailing Address	730 15th Street NW		
	Washington		

FFC	Form	1S	(Revised	02/2017)
	1 01111	10	(11041300	02/2017)

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

5(g) or (h).	Joint Fundraising Participant:	
5(g) 01 (11).	oonne i anaraising i articipant.	

1	FEC ID number	С
2.	FEC ID number	C
3.	FEC ID number	C
4	FEC ID number	C

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Dollars for Democrats

Mailing Address	Assoc. of State Democratic Chairs		
-	430 South Capitol St SE, STE 300		
	Washington		20003
Relationship:	CITY 🔺	STATE A	ZIP CODE
Connected	Organization Affiliated Committee	Joint Fundraising Representat	tive Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																											
Mailing Address																											
																L									- [
TITLE OR POSITION	•				(CI	ΓY								S	TAT	ΓE					ZIF	С	OD	E ,		
											Te	lep	ho	ne	Nu	mb	er	L] -	L				-L		

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Amalga Depository, etc.	Imated Bank			
Mailing Address	275 Seventh Avenue			
	New York		NY	10003
	CITY 🔺		STATE A	ZIP CODE

FFC	Form	1S	(Revised	02/2017)
	1 01111	10	(11041300	02/2017)

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

5(g) or (h).	Joint	Fundraising	Participant:
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1	FEC ID number	С
2.	FEC ID number	C
3.	FEC ID number	С
4.	FEC ID number	С

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Democratic Grassroots Victory Fund

Mailing Address	430 South Capitol Street SE		
	Washington		003
Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
Connected	Organization Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																										
Mailing Address																										
	L																									
																			L					- [_		
TITLE OR POSITION	•				C	ידו	Y 🔺								S	TAT	E				ZIP	C	OD	E		
											Te	elep	hor	ne	Nur	nbe	ər	L		 - L				- L		

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.																								
Mailing Address	L																							
	L																							
																	L					·L		
					C	ITY	∕▲						S	TAT	E.				ZIP	C	DC	E 🔺		1

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

Leadership PAC Sponsor

5(g) or (h).	Joint Fund	draising	Particip	ant:																			
1. [FEC	ID	num	nber	C)					_		1
2.											FEC	ID	num	nber	C)					_		1
з.											FEC	ID	nun	nber	C)	_			_		_	L
4.											FEC	ID	nun	nber	C)							1
	of Any Conn EN VICT		-	ion, Affi	liated	Comm	nittee,	Joint	Fund	drais	ing F	lepr	esei		/e, c	>r L	.ead	lers	hip		; Sp	ons	;or
Ν	lailing Addres	SS	430 SC		PITOL	STREE	ET SE																
			WASHI	INGTON													2000)3					
R	elationship:					CITY							STA	TE 🔺				Z	ZIP	COL)E '		

Affiliated Committee

Designated Agent: Identify by name, address (phone number - optional) 8.

Connected Organization

Full Name																									
Mailing Address																									
																							- [
TITLE OR POSITION	•				C	ידוכ	/ •							S	TAT	Ε				ZIP	C C	OD	E 🖌		
										Te	lepl	hor	ne I	Nur	nbe	ər	L		 · L				- L		

X Joint Fundraising Representative

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.																															
Mailing Address	L																														
	L																														
	L																														
	CITY A												STATE A							ZIP CODE											

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

5(g) or (h).	Joint	Fundraising	Participant:
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1	FEC ID number	С
2.	FEC ID number	C
3.	FEC ID number	С
4.	FEC ID number	С

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor JARED GOLDEN VICTORY FUND 2024

Mailing Address	PO Box 7108													
	Lewiston			ME 0424	40									
Relationship:		CITY A		STATE A	ZIP CODE									
Connected	Organization Affilia	ated Committee	X Joint Fundraising Representative											

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name				
Mailing Address				
TITLE OR POSITION	•	CITY A	STATE A	ZIP CODE
		Telep	hone Number	

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.			1																												
Mailing Address	L																														
	L																														
	L																														
	CITY 🔺												STATE A								ZIP CODE										