PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Sam Eppler for Congress 3419 Westminster Ave ADDRESS (number and street) (Check if address Box 268 is changed) **Dallas** 75205 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS shayne@bluewavepolitics.com (Check if address is changed) Optional Second E-Mail Address sue@bluewavepolitics.com COMMITTEE'S WEB PAGE ADDRESS (URL) sameppler.com (Check if address is changed) DATE 2023 C00841619 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. Andrade, Alex, , , Type or Print Name of Treasurer Andrade, Alex,,, [Electronically Filed] 07 07 2023 Signature of Treasurer 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 Only

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2				
TYPE OF COMMITTEE:					
Candidate 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. (Complet information below.)	te the candidate				
Name of Candidate Eppler, Sam, , ,					
Candidate Party Affiliation DEM Office Sought: House Senate President	State TX District 24				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate					
Party Committee:					
(d) This committee is a (National, State or subordinate) committee of the Republic	cratic, ican, etc.) Party				
Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	nected organization is a:				
Corporation Corporation w/o Capital Stock Lab	or Organization				
Membership Organization Trade Association Cod	perative				
In addition, this committee is a Lobbyist/Registrant PAC.					
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	gated 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 (Hybri	d PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.					
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.					
(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					
					1

l	FEC Form 1 (Revised 0	2/2009)			Page 3
V	/rite or Type Committee Name				
	Sam Eppler for	Congress			
ŝ.	Name of Any Connected On NONE	rganization, Affiliated Committee	e, Joint Fundraising Repre	esentative, or Leaders	ship PAC Sponsor
	Mailing Address				
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organiza	ation Joint Fundraising	Representative	Leadership PAC Sponsor
7.	Custodian of Records: Identi books and records.	ify by name, address (phone numbe	er optional) and position o	f the person in possess	ion of committee
	Jackson, Se	ue, , ,			
	Full Name				
	Mailing Address	122 C Street NW			
		Suite 360			
		Washington		DC 20001	
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Assistant Treasurer		Telephone num	919	592 – 9826
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number option assistant treasurer).	nal) of the treasurer of the	committee; and the na	ame and address of
	Full Name Andrade, A	lex, , ,			
	of Treasurer				
	Mailing Address	3419 Westminster Ave			
		Box 268			
		Dallas		TX 75205	
		CITY ▲		STATE ▲	ZIP CODE ▲
Title or Position ▼					
	Treasurer		Telephone num	nber 919	592 - 9826

FEC Form 1	(Revised 02/2009)	Page 4				
Full Name of Designated Agent	Thoman, Shayne, , ,					
Mailing Address	122 C Street NW					
	Suite 360					
	Washington DC 2000	1				
Title on Decition	CITY ▲ STATE ▲	ZIP CODE ▲				
Title or Position		500				
Compliance Direct	ctor Telephone number 919 -	592 9826				
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.						
Amalgamated Bank						
Mailing Address	1825 K St NW					
	Washington DC 20006	· 				
	CITY ▲ STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.						
Mailing Address						
	<u> </u>					
	CITY ▲ STATE ▲	ZIP CODE ▲				