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STATEMENT OF

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FORM 1		Ol	RGAN	IIZA	TIO	N													
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COMMITTEE (ir	full)		Check if nam changed)	ie		ole:If ty he lines		ype		121	FE4	M5			Ш				
Equality PAC																			
ADDRESS (number a	nd street)	PO Box 1	5337	1 1		1 1	1 1	1 1	I	1 1	ı	1 1	ı	ı	1 1	1	1 1	I	
(Check if a	address							1 1		1 1									
is changed	d)	Washingto	on							DC	; ,	1	200	03			1		
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COMMITTEE'S E-MA	AIL ADDRES	SS																	
(Check if a		equalityp	ac@nextleve	elpartnei	rs.net	1 1		1 1	ı	1 1		1 1	1	1	1 1	1	1 1	ı	. 1
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COMMITTEE'S WEB	PAGE ADD	RESS (UR	L)																
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2. DATE 09			y y y 2024																
3. FEC IDENTIFIC	CATION NU	MBER ▶	C	C00	550970														
4. IS THIS STATEM	MENT	NEW ((N) O	R	×	AME	ENDED) (A)											
I certify that I have e	examined thi	s Statemer	nt and to the	best o	f my kn	owledge	e and	belief	it is	true	, cor	rect	and	con	nplete	Э.			
Type or Print Name	of Treasurer	May, Jen	nifer, , ,																
Signature of Treasure	er <u>May, c</u>	Jennifer, , ,							D	ate		м м 09	1	D.	12	/		024	Y
NOTE: Submission of	false, errone		mplete inform					-	-					pena	alties	of 5	2 U.S	.C. §	30109
Office Use					F	or furthe ederal E oll Free 8	ection (Commi		act:							RM /2012)		

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	tion below.)
(b) This committee is an authorized committee, and is NOT a principal campaign comminformation below.)	nittee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized con	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on li	ne 6.) Its connected organization is a:
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) X This committee supports/opposes more than one Federal candidate, and is NOT a scommittee. (i.e., nonconnected committee)	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 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 a	accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, at least one of which is an authorized committee of a federal committee.	
(j) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal car	•
Committees Participating in Joint Fundraiser	
1.	C
2.	С

	FEC Form 1 (Revised 0)	2/2009)	l Page 3
٧	/rite or Type Committee Name	,	
	Equality PAC		
3.	-	ganization, Affiliated Committee, Joint Fundraising Representativ	re, or Leadership PAC Sponsor
	No Vote Left Behind I	PAC	
	Mailing Address	PO Box 15337	
		Washington	20003
		CITY ▲ STATE A	▲ ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization Joint Fundraising Represe	entative Leadership PAC Sponsor
7.	Custodian of Records: Identi books and records.	y by name, address (phone number optional) and position of the per	son in possession of committee
	May, Jennif	er	
	Full Name		
	Mailing Address	PO Box 15337	
		Washington	20003
		CITY ▲ STATE 4	▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	202 505 1657
3.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committed ssistant treasurer).	ee; and the name and address of
	Full Name May, Jennif of Treasurer	er, , ,	
	Mailing Address	PO Box 15337	
	Mailing Address	l	
		Washington DC	20003
		CITY ▲ STATE 4	▲ ZIP CODE ▲
	Title or Position ▼	S =	Z.i. 000E —
	Treasurer	Telephone number	202 - 505 - 1657

FEC For n	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Addres	s <u> </u>	
	CITY ▲ STATE	ZIP CODE ▲
Title or Position	n ▼	
	Telephone number	
safety deposit	er Depositories: List all banks or other depositories in which the committee depo boxes or maintains funds. Depository, etc.	sits funds, holds accounts, rents
	Bank of America	
Mailing Addres	201 Pennsylvania Ave, SE	
	Washington	
	CITY ▲ STATE	▲ ZIP CODE ▲
Name of Bank	, Depository, etc.	
	Citizens Bank	
Mailing Addres	S One Citizens Plaza	
	Providence	02903
	CITY ▲ STATE	▲ ZIP CODE ▲

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hmittee X Joint Fu	FEC ID number FEC ID number ising Representat DC STATE	tive, or Leadership PAC Spor
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h). Joint Fundraisi	5 .		
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3.		FEC ID number	С
4.		FEC ID number	С
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ame of Any Connected Cicilline Victory Fund	l Organization, Affiliated Committee, Joint Fเ า	indraising Representativ	e, or Leadership PAC Spons
Mailing Address	One Park Row		
	FI 5		
	Providence		02903
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Affiliated Committee X fy by name, address (phone number – optional	loint Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi			Ative Leadership PAC Sp
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h). Joint Fundraisi	ig raiticipant.		
1.		FEC ID number	С
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4.		FEC ID number	C
Take Back the House	Organization, Affiliated Committee, Joint Fue PAC	ndraising Hepresentativ	e, or Leadership PAC Spons
Mailing Address	PO Box 15337		
	Washington	DC	20003
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
Connecte			ative Leadership PAC Sp
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r(h). Joint Fundraisin	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	draising Representative	, or Leadership PAC Sponsor
Lofgren Victory Fund			
Mailing Address	1346 The Alameda		
	#7-380		
	San Jose	CA	95126
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization	nt Fundraising Representa	tive Leadership PAC Sponso
Full Name			
Mailing Address			
	The state of the s		
TITLE OR POSITION	▼ CITY ▲	STATE A	ZIP CODE A
TITLE OR POSITION	•	STATE ▲ Telephone Number	ZIP CODE A
	ries: List all banks or other depositories in which	Telephone Number th the committee deposits	
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	vries: List all banks or other depositories in which aintains funds.	Telephone Number th the committee deposits	

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h). Joint Fundraisi			
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ame of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representati	ve, or Leadership PAC Spon
Equality Now			
Mailing Address	PO Box 15320		
	Washington	DC	20003
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
	ed Organization Affiliated Committee X J	oint Fundraising Represer	tative Leadership PAC Sp
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ame of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Equality Texas			
Mailing Address	PO Box 15320		
	Washington	DC	20003
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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(h). Joint Fundraisin	g Participant:		
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Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Sponsor
Torres Victory Fund			
Mailing Address	PO Box 15320		
Ŭ			
	Washington	ı DC ı	20003
Deletienskin			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identify	by name, address (phone number - optional)	
Designated Agent: Identify Full Name	by name, address (phone number – optional)	
Full Name	by name, address (phone number – optional		
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1	ng Participant:		
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4.		FEC ID number	С
Name of Any Connected , Women for Equality F	Organization, Affiliated Committee, Joint F	undraising Representative	e, or Leadership PAC Spons
Voller of Equality 1			
Mailing Address	PO Box 15337		
	Washington	DC	20003
Relationship:	CITY A	STATE A	ZIP CODE ▲
Full Name			
Mailing Address			
TITLE OR POSITION	CITY ▲	STATE ▲	ZIP CODE A
1	CITY ▲	STATE ▲ Telephone Number	ZIP CODE A
Banks or Other Deposito	ories: List all banks or other depositories in whether the state of t	Telephone Number	
	pries: List all banks or other depositories in whaintains funds.	Telephone Number	s funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or ma	pries: List all banks or other depositories in whaintains funds.	Telephone Number	s funds, holds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.	ories: List all banks or other depositories in what is a substantial to the control of the contr	Telephone Number	s funds, holds accounts, rents

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Equality Delaware	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Mailing Address	PO Box 15320		
	Washington	DC DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization X Affiliated Committee Jofy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
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lame of	Any Connected (Organization, Affili	ated Committee, Joint	Fundraising Rep	presentative	e, or Leadership PAC Sp	ons
	ne Court PAC						
Ма	iling Address	PO Box 15337					
		Washington			DC	20003	
Rel	ationship:		CITY A		STATE A	ZIP CODE A	
esignat			Affiliated Committee (phone number – option	Joint Fundraising	g Representa	ative Leadership PAC	Sp
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	g Participant:		
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lame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
Parents of Trans Kids	PAC		
Mailing Address	PO Box 15337		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization X Affiliated Committee Jo	int Fundraising Representa	ative Leadership PAC Spon
	by name, address (phone number - optional)		
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	by name, address (phone number – optional)		
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Full Name	by name, address (phone number – optional)		
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Full Name	CITY A	STATE Telephone Number	ZIP CODE A

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	ng Participant:		
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Ripple of Hope PAC	d Organization, Affiliated Committee, Joint Fun	uraising nepresentative	e, or Leadership PAC Spon
Mailing Address	PO Box 15337		
	Washington 	DC DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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h). Joint Fundraisi	ig Farticipant.		
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Transgender Equalit	l Organization, Affiliated Committee, Joint Fu y PAC	ndraising Hepresentativ	e, or Leadership PAC Spon
Mailing Address	PO Box 15337		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee J	oint Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cories: List all banks or other depositories in whaintains funds.	STATE A Telephone Number ich the committee deposit	ZIP CODE A ts funds, holds accounts, rent

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h). Joint Fundraisi	9b		
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ame of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Delaware Equality P	roject		
Mailing Address	PO Box 15320		1 1 1 1 1 1 1 1 1
	Washington	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
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h). Joint Fundraisi			
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