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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. Isaac for Vermont P.O. Box 216 ADDRESS (number and street) (Check if address is changed) Brattleboro 05302 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS chris@pattonprocessing.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.isaacforvermont.com (Check if address is changed) DATE 2022 C00811182 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. Rihn, Shoshana, , , Type or Print Name of Treasurer Rihn, Shoshana, , , [Electronically Filed] 08 07 2022 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

Local 202-694-1100

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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. (Complete the candidate information below.)							
Name of Candidate Evans-Frantz, Isaac, , ,	EVALISTEIANIZ, ISAAC						
Candidate Party Affiliation DEM Office Sought: House Senate President	State VT District 00						
(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 (Dem	ocratic, blican, etc.) Party						
Political Action Committee (PAC):							
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected organization is a:						
Corporation Corporation w/o Capital Stock La	abor Organization						
Membership Organization Trade Association Co	poperative						
In addition, this committee is a Lobbyist/Registrant PAC.							
This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund o committee. (i.e., nonconnected committee) 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 (Hybridian committee)	orid PAC).						
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 committees/organizations, at least one of which is an authorized committee of a federal candidate	•						
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							

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٧	Vrite or Type Committee Name				
	Isaac for Verm	ont			
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor		
	Mailing Address				
		CITY ▲ STATI	E ▲ ZIP CODE ▲		
	Polotionship: Connector	Organization Affiliated Organization Joint Fundraising Repre			
	Relationship: Connected	Organization Alimated Organization John Fundralsing Repre	Leadership FAC Sponso		
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Rihn, Sho	shana, , ,			
	Full Name				
	Mailing Address	16 Blakeslee St			
		Brattleboro	05301		
		CITY ▲ STATI	E ▲ ZIP CODE ▲		
	Title or Position ▼	611.1 =	L = L GODL =		
	Treasurer	Telephone number	859 - 533 - 4182		
8.	Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the commassistant treasurer).	nittee; and the name and address of		
	Full Name Rihn, Sho	shana, , ,			
	of Treasurer				
	Mailing Address	16 Blakeslee St			
		Brattleboro VT	05301		
	Title or Position ▼	CITY ▲ STATE	E ▲ ZIP CODE ▲		
	Treasurer		859 _ 533 _ 4182		

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	Full Name of Designated			<u> </u>		
	Agent					
	Mailing Address					
	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲		
		Telephone no	umber			
!	Banks or Other I safety deposit box	Depositories: List all banks or other depositories in which the comming or maintains funds.	ttee deposits for	unds, holds accounts, rents		
ı	Name of Bank, D	epository, etc.				
		People's United Bank				
ı	Mailing Address	100 Main St				
		Brattleboro	VT	05301		
		CITY A	STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.						
ı	Mailing Address					
		CITY ▲	STATE ▲	ZIP CODE ▲		