**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Mathys for Congress 2304 W Shaw Ave #102 ADDRESS (number and street) (Check if address is changed) Fresno 93711 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address mathys@orofinancial.net is changed) Optional Second E-Mail Address baguirre@orofinancial.net COMMITTEE'S WEB PAGE ADDRESS (URL) mathyscongress.com (Check if address is changed) DATE 2023 C00767327 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Type or Print Name of Treasurer Aguirre, Barbara,, Date 10 03 2023 Signature of Treasurer Aguirre, Barbara, , , 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) X This committee is a principal campaign committee. (Complete the candidate information below.)  |                       |  |  |  |
| This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)  |                       |  |  |  |
| Name of Candidate Mathys, Chris, , ,   |                       |  |  |  |
| Candidate Office Sought: X House Senate President  | State CA  District 22 |  |  |  |
| (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.  | District 22           |  |  |  |
| Name of Candidate  |                       |  |  |  |
| Party Committee:   |                       |  |  |  |
| (d) This committee is a (National, State (Democration or subordinate) committee of the Republican  | ic,<br>n, etc.) Party |  |  |  |
| Political Action Committee (PAC):  |                       |  |  |  |
| (e) 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 Cooper   | rative                |  |  |  |
| In addition, this committee is a Lobbyist/Registrant PAC.  |                       |  |  |  |
| (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party 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 (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 committees/organizations, at least one of which is an authorized committee of a federal candidate.       | or more political     |  |  |  |
| 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   |                       |  |  |  |
| 1C   |                       |  |  |  |
|  |                       |  |  |  |

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|----|--|---|-----------------------|--|
| W  | Vrite or Type Committee Name                               |   |                       |  |
|    | Mathys for Cong  | ress  |                       |  |
| 6. |  |   |                       |  |
|    | NONE   |   |                       |  |
|    |  |   |                       |  |
|    | Mailing Address  |   |                       |  |
|    |  |   |                       |  |
|    |  |   | _                     |  |
|    |  | CITY ▲ STATE ▲  | ZIP CODE ▲            |  |
|    |  |   |                       |  |
|    | Relationship: Connected                                    | Organization Affiliated Organization Joint Fundraising Representative                             | Leadership PAC Sponso |  |
|    |  |   |                       |  |
| 7. | Custodian of Records: Identi books and records.            | fy by name, address (phone number optional) and position of the person in posse                   | ession of committee   |  |
|    | Mash Ot  | wio.  |                       |  |
|    | Mathys, Ch   | IIS, , ,  |                       |  |
|    | Mailing Address  | 2304 W. Shaw Ave. #102  |                       |  |
|    | ,g   |   |                       |  |
|    |  | F   |                       |  |
|    |  | Fresno CA 9371  | 1                     |  |
|    |  | CITY ▲ STATE ▲  | ZIP CODE ▲            |  |
|    | Title or Position ▼  |   |                       |  |
|    | Businessman/Rancher  |   | 438   -   9999        |  |
|    |  |   |                       |  |
| 8. | Treasurer: List the name and any designated agent (e.g., a | d address (phone number optional) of the treasurer of the committee; and the ssistant treasurer). | name and address of   |  |
|    | Full Name Aguirre, Ba                                      | rbara, , ,  |                       |  |
|    | of Treasurer   |   |                       |  |
|    | Mailing Address  | 2304 W. Shaw Ave. #102  |                       |  |
|    |  |   |                       |  |
|    |  | Fresno CA 9371  | 1                     |  |
|    |  | CITY ▲ STATE ▲  | ZIP CODE ▲            |  |
|    | Title or Position ▼  |   |                       |  |
|    |  |   | 438 - 9999            |  |

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|---|-------------------|---------------|--|--|--|
| Full Name of<br>Designated<br>Agent   |                   |               |  |  |  |
| Mailing Address   |                   |               |  |  |  |
|   |                   |               |  |  |  |
|   |                   |               |  |  |  |
|   | CITY ▲ STATE ▲    | ZIP CODE ▲    |  |  |  |
| Title or Position   | •                 |               |  |  |  |
|   | Telephone number  |               |  |  |  |
| 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.  |                   |               |  |  |  |
|   | Citizens Bank     |               |  |  |  |
| Mailing Address   | 505 S. Main       |               |  |  |  |
|   |                   |               |  |  |  |
|   | Las Cruces NM     | 88001         |  |  |  |
|   | CITY ▲ STATE ▲    | ZIP CODE ▲    |  |  |  |
| Name of Bank, Depository, etc.  |                   |               |  |  |  |
|   |                   |               |  |  |  |
| Mailing Address   |                   |               |  |  |  |
|   |                   |               |  |  |  |
|   |                   |               |  |  |  |
|   | CITY ▲ STATE ▲    | ZIP CODE ▲    |  |  |  |