Only

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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. EON FOR CONGRESS VA-08. 2509 20th Rd N #106 ADDRESS (number and street) (Check if address is changed) Arlington 22201 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address stephen.leon.wdc@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.leonforcongress.us/ (Check if address is changed) DATE 30 2023 C00858639 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 Leon, Stephen, Alan, Mr., Leon, Stephen, Alan, Mr., Date 01 12 2024 Signature of Treasurer 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.)				
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	ne candidate			
Name of Candidate Leon, Stephen, Alan, Mr.,				
Candidate Party Affiliation IND Office Sought: X House Senate President	State VA District 08			
(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 (Democration or subordinate) committee of the Republican	c, ı, 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	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 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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٧	Vrite or Type Committee Name				
_	LEON FOR CON				
6.		ganization, Affiliated Committee, Joint Fundraising Represent	tative, or Leaders	ship PAC Sponsor	
	NONE				
	Mailing Address				
		CITY ▲ STA	TE ▲	ZIP CODE ▲	
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Rep	presentative	Leadership PAC Sponso	
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	The state of the s	nen, Alan, Mr.,			
	Full Name	2509 20th Rd N #106			
	Mailing Address	2007 2011 10 10 10 10 10 10 10 10 10 10 10 10			
		Arlington	A 22201	-	
		CITY ▲ STA		ZIP CODE ▲	
	Title or Position ▼				
	Treasurer	Telephone number	571	305 - 0178	
8.	3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and any designated agent (e.g., assistant treasurer).				
	Full Name Leon, Steple of Treasurer	nen, Alan, Mr.,			
	Mailing Address	2509 20th Rd N #106			
		Arlington	VA 22201		
	Title or Position ▼	CITY ▲ STA	TE ▲	ZIP CODE ▲	
	Treasurer	Telephone number	571 -	305 - 0178	

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Full Name of Designated Agent							
Mailing Address							
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲				
	Telephone num	ber					
Banks or Other Depositori safety deposit boxes or main	es: List all banks or other depositories in which the committe ntains funds.	e deposits funds, holds	accounts, rents				
Name of Bank, Depository,	Name of Bank, Depository, etc.						
Apple F	Apple Federal Credit Union						
Mailing Address	P.O. Box 1200						
	Fairfax	VA 22038					
	CITY A	STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY ▲	STATE ▲	ZIP CODE ▲				