FEC

Only

STATEMENT OF

PAGE 1 / 4

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

E	EC Form 1 (Revised 03/2022)	Page 2				
	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 can information below.)						
	Name of Candidate Mathys, Chris, , ,					
	Candidate Party Affiliation REP Office Sought: House Senate President	State CA District 22				
	(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 Republican, etc.	c.) Party				
Political Action Committee (PAC):						
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	organization is a:				
	Corporation Corporation w/o Capital Stock Labor Orga	nization				
	Membership Organization Trade Association Cooperative)				
	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 par 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 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 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					
	1C					

	FEC Form 1 (Revised 0	2/2009)	Page 3		
٧	rite or Type Committee Name				
<u> </u>	Mathys for Cong	TESS ganization, Affiliated Committee, Joint Fundraising Representative	e. or Leadership PAC Sponsor		
-	NONE	ga	,, o		
	Mailing Address				
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Represen			
	_				
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Mathys, Ch	ńs			
	Full Name				
	Mailing Address	2304 W. Shaw Ave. #102			
		Fresno	93711		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Businessman/Rancher	Telephone number	559 - 438 - 9999		
3.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee ssistant treasurer).	e; and the name and address of		
	Full Name Aguirre, Ba	bara, , ,	1		
	of Treasurer	2304 W. Shaw Ave. #102			
	Mailing Address	2304 W. Shaw Ave. #102			
		Fresno CA	93711		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
		Telephone number	559 - 438 - 9999		

FEC Fo r	n 1 (Revised 02/2009)			Page 4			
Full Name of Designated							
Agent							
Mailing Addre	ss						
Title or Posit		CITY A	STATE ▲	ZIP CODE ▲			
		Telephone	e number				
Banks or Ot safety deposi	ner Depositories: List all banks or other boxes or maintains funds.	depositories in which the con	nmittee deposits funds, h	olds accounts, rents			
Name of Ban	Name of Bank, Depository, etc.						
	Citizens Bank						
Mailing Addre	505 S. Main	<u> </u>					
				1			
	Las Cruces		NM 8800	<u></u>			
	(CITY A	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.							
Mailing Addre	ss						
	(CITY A	STATE ▲	ZIP CODE ▲			