Only

STATEMENT OF

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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. **Downballot Dems** PO Box 156 ADDRESS (number and street) (Check if address is changed) **Dallas** 30132 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS downballotdems@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00767830 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. Trambauer-Smith, Brittany, , , Type or Print Name of Treasurer Trambauer-Smith, Brittany, , , [Electronically Filed] 05 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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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	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
_	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 separate secommittee. (i.e., nonconnected committee)	gregated 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.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee N		-
Downballot D	ems	
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: books and records. 	Identify by name, address (phone number optional) and position of the person in	1 possession of committee
Tramb	oauer-Smith, Brittany, , ,	
	PO Box 156	
Mailing Address		
	Dallas GA 301	32
Title or Position	CITY STATE	ZIP CODE
	Telephone number 770	- 904 - 9340
Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the committee; and th g., assistant treasurer).	e name and address of
Full Name Trambo	auer-Smith, Brittany, , ,	
Mailing Address	PO Box 156	
	Dallas GA 301:	
Title or Position	CITY STATE	ZIP CODE
	Telephone number 770	- 904 - 9340

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE :	ZIP CODE
Title or Position		
safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds.	accounts, Tents
Name of Bank, I	Amalgamated Bank	
Name of Bank, I		
	Amalgamated Bank	
	Amalgamated Bank 275 Seventh Avenue New York NY 10001	ZIP CODE
	Amalgamated Bank 275 Seventh Avenue New York NIV 10001	ZIP CODE
Mailing Address	Amalgamated Bank 275 Seventh Avenue New York NIV 10001	
Mailing Address	Amalgamated Bank 275 Seventh Avenue New York CITY STATE Depository, etc.	
Mailing Address Name of Bank, I	Amalgamated Bank 275 Seventh Avenue New York CITY STATE Depository, etc.	
Mailing Address Name of Bank, I	Amalgamated Bank 275 Seventh Avenue New York CITY STATE Depository, etc.	