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. Gunderson for Congress 3774 Mission Ave #272 ADDRESS (number and street) (Check if address is changed) Oceanside 92058 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address info@campaign-compliance.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.gowithgunderson.com (Check if address is changed) DATE 2024 C00840108 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 Gunderson, Matt,, Date 11 21 2024 Signature of Treasurer Gunderson, Matt, , , 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

FEC 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 candidate information below.)	
Name of Candidate Gunderson, Matt, , ,	
Candidate Party Affiliation REP Office Sought: House Senate President	CA
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	49
Name of Candidate	
Party Committee: (d) This committee is a (National, State or subordinate) committee of the Republican, etc.) Party	
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	is a:
Corporation Corporation w/o Capital Stock Labor Organization	
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 party committee. (i.e., nonconnected committee)	y
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
(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.	.I
Committees Participating in Joint Fundraiser	
1. C]

	FEC Form 1 (Revised 0)	2/2009)	Page 3
V	Irite or Type Committee Name		
	Gunderson for C	ongress	
6.	<u>-</u>	ganization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
	GUNDERSON FOR (CA-49 REPUBLICAN NOMINEE FUND 2024	
	Mailing Address	PO BOX 9891	
		ARLINGTON	22219
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization Joint Fundraising Representation	Leadership PAC Sponso
7.	Custodian of Records: Identification books and records.	fy by name, address (phone number optional) and position of the person	ı in possession of committee
	Gunderson	Matt	
	Full Name		
	Mailing Address	3774 Mission Ave #272	
		Oceanside	92058
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	5.1. =	Zii
	Treasurer	Telephone number	949 - 940 - 5872
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; ssistant treasurer).	and the name and address of
	Full Name Gunderson	Matt, , ,	
	of Treasurer	2774 Mississ Aug #970	
	Mailing Address	3774 Mission Ave #272	
		Oceanside	92058
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	949 940 5872

	FEC Form 1	(Revised 02/2009)	Page 4
	Name of signated ent		
Mai	iling Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
Title	e or Position	7	
		Telephone number	-
safe	ety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, xes or maintains funds. Depository, etc.	holds accounts, rents
		Bank of America	
		₁ 27752 Antonio Pkwy	
Mail	ling Address	27732 AIROING PRWY	
		Ladera Ranch CA 926	694
		CITY ▲ STATE ▲	ZIP CODE ▲
Nam	ne of Bank, D	Depository, etc.	
		Chain Bridge Bank	
Mail	ling Address	1445-A Laughlin Ave	
		McLean VA 221	01
		CITY ▲ STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Sponso
Mailing Address	9070 IRVINE CENTER DRIVE #150		
Relationship:	IRVINE CITY A	CA STATE A	92618 ZIP CODE ▲
riciationship.	GII I A	SIAIE	ZIP CODE
Full Name			
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
1			
		Telephone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in which		s funds, holds accounts, rents
Name of Bank, Tri Cou	ries: List all banks or other depositories in which intains funds. nties Bank		s funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	•		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
SCALISE LEADERS	HIP FUND 2024		
Mailing Address	320 1ST ST SE		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi	Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
		: Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi		Fundraising Represent	Leadersnip PAC Spo
Pesignated Agent: Identi		Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	ZIP CODE A
Pesignated Agent: Identi	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
Pesignated Agent: Idention Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or many part of the control of the	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Idention Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A elephone Number the committee deposit	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the control of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A elephone Number the committee deposit	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the property of the propert	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the property of the propert	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ig i ai tioipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representativ	e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON ST.		
	STE. 115		<u> </u>
Relationship:	ALEXANDRIA CITY	VA VA STATE ▲	22314 ZIP CODE ▲
		01/112 =	211 0002 2
	d Organization Affiliated Committee X Joint by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
		t Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Spo
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Spo
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Spo
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Spo
esignated Agent: Identification Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Te	STATE A elephone Number the committee deposit	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, repository, etc.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A s funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1			FEC ID nu	mber C	
2.			FEC ID nu	mber (
3.			FEC ID nu	mber (
4.			FEC ID nu	mber (
OC VICTORY 202	_	filiated Committee, Joint I	Fundraising Represe	entative, o	or Leadership PAC Spons
Mailing Address	9460 TEGNER	R ROAD	1 1 1 1 1 1 1		
	HILMAR			CA	95324 ZIP CODE ▲
Relationshin:		CITV A	CT.		/ IP (// IIP 🔺
	ected Organization	CITY A Affiliated Committee ss (phone number – option	ST/ Joint Fundraising Rep al)		
connections and connections are connected as a conn		Affiliated Committee X	Joint Fundraising Rep		
Conne		Affiliated Committee X	Joint Fundraising Rep		
esignated Agent: Ide		Affiliated Committee X	Joint Fundraising Rep		
esignated Agent: Ide		Affiliated Committee X	Joint Fundraising Repair al)	presentativ	Leadership PAC Sp
connections and connections are connected as a conn	entify by name, addres	Affiliated Committee X	Joint Fundraising Rep	presentativ	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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r(h). Joint Fundraisin	g Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representativ	e, or Leadership PAC Sponsor
GROW THE MAJORI	TY CA		
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connectico	Affiliated Committee	Joint Fundraising Represent	Leadership PAC Spons
Designated Agent: Identify	by name, address (phone number - option	nal)	
	by hame, dadress (phone hamber opine	iai)	
Full Name			
Full Name			
Full Name			
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A