Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Briscoe for Congress 2022 3843 S Bristol St #604 ADDRESS (number and street) (Check if address is changed) Santa Ana 92704 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS lysaray.campaignservices@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 04 2021 C00734871 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR 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. Ray, Lysa,,, Type or Print Name of Treasurer Ray, Lysa,,, [Electronically Filed] 06 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

ı	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
(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. (Compinformation below.)	olete the candidate
Name Cand	e of lidate	Briscoe, John, , ,	
	lidate ⁄ Affiliati	on REP Office Sought: X House Senate President	State CA District 47
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name	e of lidate		
Part	ty Con	nmittee: (National, State	Democratic,
(d)		· · · · · · · · · · · · · · · · · · ·	Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nected 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 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.)	
Join	t Fund	Iraising 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	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	1		

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Write or Type Committee N		
Briscoe for Co	ongress 2022	
	ed Organization, Affiliated Committee, Joint Fundraising Representative	/e, or Leadership PAC Sponsor
None		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Represer	ntative Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the	person in possession of committee
None,	,,,,	
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
. Treasurer : List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committe .g., assistant treasurer).	ee; and the name and address of
Full Name Ray, L	_ysa, , ,	
Mailing Address	3843 S Bristol St suite 604	
	Santa Ana	92704
Title or Position , Treasurer	CITY STATE	ZIP CODE 714 540 2295
	Telephone number	

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Full Name of Designated Agent	None, , , ,			
Mailing Address				
		CITY	STATE	ZIP CODE
Title or Position				
		Telephone num	nber	
safety deposit be	oxes or maint			
safety deposit be Name of Bank, I	Depository, et	tains funds.		
Name of Bank,	Depository, et	tains funds. tc. America		
Name of Bank,	Depository, et	tains funds. tc. America 3730 S Bristol St	CA 92701	
Name of Bank,	Depository, et	America 3730 S Bristol St		ZIP CODE
Name of Bank,	oxes or maint Depository, et Bank of	America 3730 S Bristol St Santa Ana CITY	CA 92701	
Name of Bank,	Depository, et	America 3730 S Bristol St Santa Ana CITY	CA 92701 STATE	ZIP CODE
Name of Bank,	Depository, et	America 3730 S Bristol St Santa Ana CITY	CA 92701 STATE	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, et	America 3730 S Bristol St Santa Ana CITY	CA 92701 STATE	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, et	America 3730 S Bristol St Santa Ana CITY	CA 92701 STATE	ZIP CODE