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. Hoops PAC PO Box 3314 ADDRESS (number and street) (Check if address is changed) Portland 97208 OR CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address joctyree@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00392738 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 Michels, F. Stephen, , Michels, F. Stephen, , , 04 12 2024 Signature of Treasurer Date 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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FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate 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 campaig information below.)	n committee. (Complete the candidate
Name of Candidate	
Candidate Office Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an autho	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization	ion on line 6.) Its connected organization is a:
Occuration was continued to the	de la bara Compania di sa
Corporation Corporation w/o Capital Stoce Membership Organization Trade Association	Labor Organization Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	Cooperative
(f) X This committee supports/opposes more than one Federal candidate, and is committee. (i.e., nonconnected committee)	NOT a separate segregated 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.)
(g) This committee is an independent expenditure-only political committee (Superior Committee)	er PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contri	bution accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburs committees/organizations, at least one of which is an authorized committee	•
(j) This committee collects contributions, pays fundraising expenses and disburs committees/organizations, none of which is an authorized committee of a fee	•
Committees Participating in Joint Fundraiser	
1.	C

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	FEC Form 1 (Revised 0	2/2009)	Page 3
٧	Vrite or Type Committee Name		
	Hoops PAC		
6.	Name of Any Connected On Wyden, Ron, L., ,	ganization, Affiliated Committee, Joint Fundraising Representative, or Leader	ership PAC Sponsor
	Mailing Address	1220 SW Morrison St	
		Ste 910	
		Portland	9
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization	∠ Leadership PAC Sponso
7.	Custodian of Records: Identi	fy by name, address (phone number optional) and position of the person in posse	ession of committee
	Tyree, Joce	lyn	
	Full Name		
	Mailing Address	8935 SW Bellflower St	
		Tigard OR 9722	4
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Assistant Treasurer	Telephone number 503 -	708 - 1059
3.	Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and the ssistant treasurer).	name and address of
	Full Name Michels, F. of Treasurer	Stephen, , ,	
	Mailing Address	1924 SW Palatine St	
		Portland OR 9721	9
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	892 - 9507

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Full Name of Designated Agent Mailing Address	Tyree, Jocelyn, , , 8935 SW Bellflower St	
	Tigard OR STATE ▲	97224 ZIP CODE ▲
Title or Position Assistant Treas	▼	
	r Depositories: List all banks or other depositories in which the committee deposits fur oxes or maintains funds.	nds, holds accounts, rents
Name of Bank,	Depository, etc.	
Mailing Address	Bank of America PO Box 53132	
	Phoenix AZ	85072
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank,	Depository, etc.	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representativ	re, or Leadership PAC Spons
vvyderi for Gregori			
Mailing Address	PO Box 3271		
	Portland	OR	97208
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	tative Leadership PAC Sp
		Fundraising Represent	tative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	tative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	tative Leadership PAC Sp
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esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Te	STATE stelephone Number the committee deposi	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE stelephone Number the committee deposi	ZIP CODE ▲ ts funds, holds accounts, rent

FEC Form 1S (Revised 02/2017)

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

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	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
		_	
ame of Any Connected	l Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spons
Wyden Fund for a S	enate Majority		
	600 PENNSYLVANIA AVE SE #15180		
Mailing Address			
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X fy by name, address (phone number – optiona	Joint Fundraising Represent	Leadership 170 Sp
			ative Leadership PAC Sp
esignated Agent: Identi			Leavership 170 Sp
esignated Agent: Identi			Leavership 170 Sp
esignated Agent: Identi			Leavership FAO Sp
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optiona	i)	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optiona	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional line) CITY ▲ Ories: List all banks or other depositories in which is the state of the s	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market.	fy by name, address (phone number – optional line) CITY ▲ Ories: List all banks or other depositories in which is the state of the s	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional content of the conten	STATE Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional content of the conten	STATE Telephone Number nich the committee deposi	ZIP CODE ZIP CODE ts funds, holds accounts, rent
esignated Agent: Identification Full Name	fy by name, address (phone number – optional content of the conten	STATE Telephone Number nich the committee deposi	ZIP CODE ZIP CODE ts funds, holds accounts, rent
esignated Agent: Identification Full Name	fy by name, address (phone number – optional content of the conten	STATE Telephone Number nich the committee deposi	ZIP CODE ZIP CODE ts funds, holds accounts, rent