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STATEMENT OF **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. Team New Hampshire 918 Pennsylvania Ave SE ADDRESS (number and street) (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS zamore@capcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00641217 FEC IDENTIFICATION NUMBER > 3. 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. Zamore, Judith, , , Type or Print Name of Treasurer Zamore, Judith,,, [Electronically Filed] 05 2017 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 Only

Local 202-694-1100

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		OMMITTEE	
Car	ndidate	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.)	lete the candidate
Nam Can	e of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, lepublican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 seg committee. (i.e., nonconnected committee)	regated 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	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	A NEW DIRECTION PAC FEC ID number C C004	58570
	2.	SHAHEEN FOR SENATE FEC ID number C C0045	57325
	3.	GRANITE VALUES PAC FEC ID number C C0062	29311
	4.	MAGGIE FOR NH	8772

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Write or Type Committee Nar				
Team New Ha	•			
6. Name of Any Connected	Organization, Affiliated Committe	e, Joint Fundraising Rep	resentative, or Le	adership PAC Sponsor
NONE				
Mailing Address				
	CITY		STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Comm	ittee Joint Fundraising	g Representative	Leadership PAC Sponsor
. Custodian of Records: Id books and records.	entify by name, address (phone nun	nber optional) and posit	ion of the person	in possession of committee
	Judith, , ,			
Full Name	918 Pennsylvania Ave SE			
Mailing Address				
	Washington		DC 20	003
Title or Position	CITY		STATE	ZIP CODE
Treasurer		Telephone nur	mber	
t. Treasurer: List the name a any designated agent (e.g.	and address (phone number option , assistant treasurer).	nal) of the treasurer of the	e committee; and the	he name and address of
Full Name Zamore, of Treasurer	Judith, , ,			
Mailing Address	918 Pennsylvania Ave SE			
		<u> </u>		
	Washington		DC 200	003
Title or Position	CITY		STATE	ZIP CODE
Treasurer		Telephone nun	nber L	

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Full Name of Designated Agent	Solander, Kristin, , ,	
Mailing Address	918 Pennsylvania Ave SE	
	Washington DC 20003  CITY STATE ZIF	P CODE
Title or Position Assistant Treasur		
Banks or Other I	Depositories: List all banks or other depositories in which the committee deposits funds, holds are	ccounts, rents
safety deposit box Name of Bank, De	tes or maintains funds.	ccounts, rents
safety deposit box Name of Bank, De	epository, etc.  Amalgamated Bank	ccounts, rents
safety deposit box Name of Bank, De	epository, etc.  Amalgamated Bank	ccounts, rents
safety deposit box Name of Bank, De	Amalgamated Bank  1825 K St NW  Washington  DC 20006	P CODE
safety deposit box Name of Bank, De	Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  ZIF	
safety deposit box Name of Bank, De  Mailing Address	Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  ZIF	
safety deposit box Name of Bank, De  Mailing Address	Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  ZIF	
safety deposit box Name of Bank, De  Mailing Address  Name of Bank, De	Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  ZIF	
safety deposit box Name of Bank, De  Mailing Address  Name of Bank, De	Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  ZIF	