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STAT	EM	ENT	OF
ORG	ANI	ZATI	ON

FEC FORM 1		STATEME ORGANIZ			PAGE 1 / 4
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number an		4800 W. Gates Pass Rd.			
(Check if a is changed	ddress				
13 changea				AZ 85	745
		CITY ▲		STATE A	ZIP CODE▲
COMMITTEE'S E-MA	IL ADDRESS				
× < (Check if a is changed)		cassidy@scifirstforhunters	org		
	C	Optional Second E-Mail Ac	dress		I
	L				
COMMITTEE'S WEB	ddress I	ESS (URL)			
2. DATE 03	/ D D D 20	/ Y Y Y Y Y 2024			
3. FEC IDENTIFIC	ATION NUM	BER ► C C	00541433		
4. IS THIS STATEM	IENT	NEW (N) OR	× AMENDED (A)		
I certify that I have ex	xamined this	Statement and to the best	of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name o	f Treasurer	Cassidy, Benjamin, , ,			
Signature of Treasure	r Cassidy,	Benjamin, , ,		Date 03	/ D D / Y Y Y Y 20 / 2024
NOTE: Submission of f			may subject the person signing the transmission of the term of		penalties of 52 U.S.C. §30109.
Office Use Only			For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 03/2022)	Page 2
5. 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 campaign committee. (Com information below.)	plete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate Presider	
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
(d) This committee is a	emocratic, oublican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its c	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 se committee. (i.e., nonconnected committee)	egregated 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) X This committee is an independent expenditure-only political committee (Super PAC).	
X In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (H	lybrid 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) 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.
Committees Participating in Joint Fundraiser
2.

Relationship:

Connected Organization

-	FEC Form 1 (Revised 0)	2/2009)				Page 3
٧	Vrite or Type Committee Name					
	HUNTER ACTIO)N FUND (ł	HAF)			
6.	Name of Any Connected Or	rganization, Affilia	ted Committee, Jo	int Fundraising Re	presentative, or Lea	adership PAC Sponsor
	Mailing Address					
			CITY 🔺		STATE A	ZIP CODE ▲

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Joint Fundraising Representative

Leadership PAC Sponsor

Affiliated Organization

Cassidy, B	Benjamin, , ,						
Full Name							
Mailing Address	4800 W Gates Pass Road						
		AZ 85745					
	CITY A	STATE 🔺	ZIP CODE				
Title or Position ▼							
Treasurer		Telephone number					

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Cassidy, Benjamin, , ,								
Mailing Address	4800 W Gates Pass Road								
	Tucson AZ 85745								
	CITY ▲ STATE ▲ ZIP CODE ▲								
Title or Position ▼									
Treasurer Telephone number									

FEC Form 1 (Revised 02/2009)									
Full Name of Designated Agent									
Mailing Address									
	CITY A STATE A	ZIP CODE							
Title or Position ▼									
	Telephone number								

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

\ ا	Wells Fai	rgo									<u> </u>												
Mailing Address		7901	Wisco	onsin	Aven	ue																	
		Bethe	esda											L	MD		208	314 					
						(CIT	Y ▲						ST	ATE				ZIP	COI	DE 🖌		
Name of Bank, Dep	oository, et	C.																					
L																							
Mailing Address																							
														L									
						(CIT	Y 🔺						ST	ATE				ZIP	COI	DE 🖌	•	