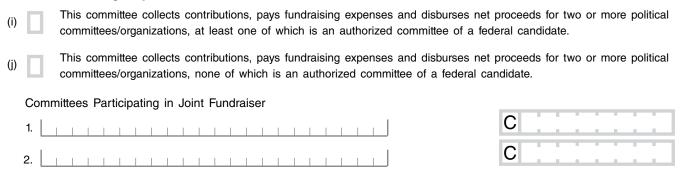
FEC FORM 1		STATEMEN ORGANIZA		Off	PAGE 1 / 4
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Sarepta The	rapeuti	cs, Inc. Political Ac	tion Committee (S	arepta PAC	;)
ADDRESS (number a	nd street)	c/o 28 Liberty Ship Way			
(Check if a is changed		Suite 2815			
	-,	Sausalito CITY ▲		CA 949 STATE ▲	65
COMMITTEE'S E-MA	AIL ADDRES	S			
 (Check if a is changed 		sarepta@politicomlaw.com			
		Optional Second E-Mail Addr	ess		
COMMITTEE'S WEB	address	RESS (URL)			
2. DATE	9 / D 11	2023			
3. FEC IDENTIFICATION NUMBER ► C C00850339					
4. IS THIS STATEN	MENT ×	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.					
Type or Print Name of Treasurer Skelton, Jennie, , ,					
Signature of Treasure	er Skelto	n, Jennie, , ,		Date 09	D D / Y Y Y Y 11 2023
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 Use Only			For further information courses Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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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. (Complete the car information below.)	didate
	Name of Candidate	
	Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
-	 (d) This committee is a (National, State or subordinate) committee of the Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.) 	
	Corporation Corporation w/o Capital Stock	zation
	Membership Organization Trade Association Cooperative	
	X 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 function committee. (i.e., nonconnected committee)	d 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 (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:



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Write or Type C	ommittee Name	
Sarept	a Therapeutics, Inc. Political Action Committee (S	arepta PAC)
6. Name of An	y Connected Organization, Affiliated Committee, Joint Fundraising Representati	ive, or Leadership PAC Sponsor
Sarepta	Therapeutics, Inc.	

Mailing Address	215 First St
	<u> </u>
	Cambridge MA 02142
	CITY ▲ STATE ▲ ZIP CODE ▲
Relationship: X Connected	Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Sponso

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

Skelton, Je	nnie, , ,
Full Name	
Mailing Address	28 Liberty Ship Way
	Suite 2815
	Sausalito
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Custodian of Records	Image: Telephone number 415 - 903 - 2800

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	, Skelton, Jennie, , ,			
of Treasurer				
Mailing Address	28 Liberty Ship Way			
	Suite 2815			
	Sausalito CA 94965			
	CITY A STATE A ZIP CODE A			
Title or Position ▼				
Treasurer	Image:			

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Full Name of Designated Agent	Deeb, Gavin, , ,
Mailing Address	28 Liberty Ship Way
	Suite 2815
	Sausalito CA 94965
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Assistant Treasu	rer 415 903 2800 Telephone number 1 1 1

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.

	Bank of Marin		
Mailing Address	2656 Bridgeway		
	Suite D		
	Sausalito	CA 94965	
	CITY 🔺	STATE A	ZIP CODE ▲
Name of Bank, [Depository, etc.		1
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE