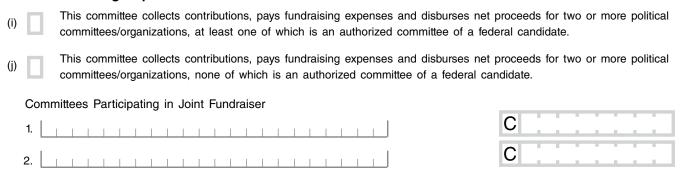
FEC FORM 1	STATEMEN ORGANIZA		Office	PAGE 1 / 21
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
New York State De		<b>e</b>		
ADDRESS (number and street)	64 Beaver St. #210			
(Check if address is changed)				
	New York		NY 10004	
	CITY ▲		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address is changed)	leslien@nydems.org			
Ç ,	Optional Second E-Mail Add	lress		
COMMITTEE'S WEB PAGE AD	www.nydems.org			
	14 / Y Y Y Y 2024			
3. FEC IDENTIFICATION N	UMBER ► C co	0143230		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief	it is true, correct and co	omplete.
Time or Drint Name of Trace	· · · · · · ·			
Type or Print Name of Treasure	Jenkins, Kenneth, , ,			
Signature of Treasurer Jeni	kins, Kenneth, , ,		Date 07	24 / Y Y Y Y 2024
NOTE: Submission of false, error	eous, or incomplete information i ANY CHANGE IN INFORMAT			nalties of 52 U.S.C. §3010
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	sion	EC FORM 1 Revised 06/2012)

FEC Form 1 (Revised 03/2022)	Page <b>2</b>
. 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 information below.)	the candidate
Name of Candidate	
Candidate Party Affiliation Office Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:       (National, State       DEM       (Democration of the committee of the committe	atic, an, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a:
Corporation Corporation w/o Capital Stock	r Organization
Membership Organization Trade Association Coop	erative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee. (i.e., nonconnected committee)	ated 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 (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:



FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	

## New York State Democratic Committee

6.	Name of Any Connected Or	ganization, Affiliate	ed Comr	nittee,	Joir	nt F	undr	aisiı	ng F	Repre	ese	ntat	ive,	or	Lea	der	ship	PA	C S	Spor	າsor	
	Democratic Grassroo	ts Victory Fund	<b>k</b>																			
	Mailing Address	430 South Capitol S	treet SE																			
		Washington													20	003			-[			
			CIT	Y 🔺							ST	ATE					ZI	P CO	DDE	Ξ 🔺		
	Relationship: Connected	Organization Aff	iliated Or	ganizat	ion	×	Joi	nt Fu	undra	aising	g Re	pres	enta	ative	Ð		Lea	ders	hip	PAC	Spc	onsoi

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

Ng, Leslie	,,,
Full Name	
Mailing Address	64 Beaver St. #210
	New York         NY         10004
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Accounts Manager	Telephone number     212     725     8825

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	Jenkins, Kenneth, , ,
Mailing Address	64 Beaver St #210
	New York         NY         10004           Image: Ima
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	·
Treasurer	Image: Telephone number     212     725     8825

FEC Form 1 (Revised 02	2/2	009	9)																			Pag	ge 4	4	
Full Name of Designated Agent														1											
Mailing Address																									
																							- [		
						Cľ	ΤY							:	STA	λΤΕ				Z	IP (	CO	DE		
Title or Position ▼																									
										Tele	eph	one	e ni	umt	ber				- [_				·		

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.

Ca	pital One Bank		
Mailing Address	299 Park Avenue		
	14th Floor		
	New York	NY 1017	1
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Depos			
Sig	gnature Bank		
Mailing Address	71 Broadway		
	New York	NY 1000	
	CITY A	STATE 🔺	ZIP CODE

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

or(h). Joint Fundra	ising Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
-	ted Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
Harris Victory Fun	d 		
Mailing Address	430 South Capitol Street SE		
	Washington		20003
Relationship:		STATE A	
Conne	ected Organization	t Fundraising Representa	tive Leadership PAC Sponse
Designated Agent: Ide	entify by name, address (phone number – optional)		
Designated Agent: Ide	entify by name, address (phone number - optional)		
	entify by name, address (phone number – optional)		
Full Name	entify by name, address (phone number - optional)		
Full Name	entify by name, address (phone number - optional)		
Full Name			<pre></pre>
Full Name	<pre></pre>		
Full Name	<pre></pre>	I	
Full Name Mailing Address TITLE OR POSITI	Image: Image	elephone Number	
Full Name	Image: Image	elephone Number	
Full Name Mailing Address TITLE OR POSITI  Banks or Other Depo safety deposit boxes of	Image: Image	elephone Number	
Full Name	CITY ▲ CITY ▲ CITY ▲ CITY ▲ CITY ▲ CITY ▲	elephone Number	
Full Name Mailing Address TITLE OR POSITI  Banks or Other Depo safety deposit boxes of Name of Bank, Ama	ON ▼ CITY ▲ T	elephone Number	
Full Name	ON ▼ CITY ▲ T	elephone Number	

STATE **A** 

ZIP CODE

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

or(h). Joint Fundra	aising Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connect	cted Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
Mailing Address	PO Box 15320		
	Washington		20003
Relationship:		STATE ▲	
Conn	ected Organization	int Fundraising Representa	ative
Designated Agent: Id	entify by name, address (phone number - optional)		
Designated Agent: Id	entify by name, address (phone number – optional)		
	entify by name, address (phone number - optional)		
Full Name	entify by name, address (phone number - optional)		
Full Name	entify by name, address (phone number - optional)		
Full Name			<pre></pre>
Full Name	L L L L L L L L L L L L L L L L L L L		<pre></pre>
Full Name	L L L L L L L L L L L L L L L L L L L	I I I I I I I I I I I I I I I I I I I	· · · · · · · · · · · · · · · · · · ·
Full Name	L L L L L L L L L L L L L L L L L L L	Telephone Number	
Full Name	CITY ▲ CITY ▲ CITY ▲ CITY ▲ CITY ▲	Telephone Number	
Full Name Mailing Address TITLE OR POSIT  Banks or Other Depo safety deposit boxes of Name of Bank,Am	CITY ▲ CITY ▲ CITY ▲ CITY ▲ CITY ▲	Telephone Number	
Full Name	CITY ▲ C	Telephone Number	
Full Name Mailing Address TITLE OR POSIT  Banks or Other Depo safety deposit boxes of Name of Bank,Am	CITY ▲ C	Telephone Number	
Full Name	CITY ▲ C	Telephone Number	

STATE **A** 

ZIP CODE

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

r(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
Delgado Victory Fun	d 2022		
	DO D		
Mailing Address	PO Box 65322		
	Washington		20035
Relationship:	CITY ▲	STATE A	ZIP CODE
	d Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Sponso
		t Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sponse
Designated Agent: Identi		t Fundraising Represent	Leadership         PAC         Sponse
Designated Agent: Identi		t Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identi Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Represent	ative
Designated Agent: Identi	y by name, address (phone number – optional)		
Designated Agent: Identi Full Name Mailing Address	y by name, address (phone number – optional)		
Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional)		
Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional)		
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or m Name of Bank, Bank (	y by name, address (phone number – optional)		
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	y by name, address (phone number – optional)		
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or m Name of Bank, Bank (	y by name, address (phone number – optional)		
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	y by name, address (phone number – optional)		

CITY

STATE 🔺

ZIP CODE

1			F	EC ID number	С			_
2.			F	EC ID number	С			
3.			F	EC ID number	С			
4.			F	EC ID number	С			
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lame of Any Connected	Organization, A	ffiliated Committee, Jo	oint Fundraisir	ng Representat	ive, or Le	eadership	PAC Spo	onso
DNC Services Corp./E	Democratic Nat	tional Committee						
Mailing Address	430 South Cap	bitol Street SE						
								I
	Washington				20	0003		
						ZIP		
Relationship:		CITY 🔺		STATE A				
	Organization	Affiliated Committee		STATE / draising Represe		-	ship PAC	Spor
Connected		Affiliated Committee				-		Spor
Connected Designated Agent: Identify		Affiliated Committee				-		Spor
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Connected	by name, addre	Affiliated Committee	ptional)	draising Represe			ship PAC :	Spon

-EC	Form	1S	(Revised	02/2017)
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

ZIP CODE

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			FEC ID number	С
			FEC ID number	С
			FEC ID number	С
			FEC ID number	С
cted Organization,	, Affiliated Committee, 、	Joint Fundrai	sing Representativ	e, or Leadership PAC Sponso
Fund				
<u> </u>	<u> </u>			
PO Box 21	13			
Kingston			NY	12402
<u> </u>	CITY A		STATE	
ected Organization	Affiliated Committee	× Joint F	undraising Represent	tative Leadership PAC Spo
entify by name, ad	dress (phone number –	optional)		
L				
- -	Fund	Fund PO Box 2113 For a constraint of the second constraint of the secon	Fund PO Box 2113 Kingston CITY	FEC ID number FEC ID number FEC ID number FEC ID number Fund PO Box 2113 Kingston Kingston Kingston Affiliated Committee Affiliated Committee X Joint Fundraising Representation

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(g) or (h).	Joint Fundraising	g Participant:				
1.				FEC	ID number	С
2.				FEC	ID number	С
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	-	Organization, Affi	iated Committee, Joint	t Fundraising R	epresentativ	e, or Leadership PAC Sponsor
	stelli Victory Fund					
	Mailing Address	PO Box 15320				
	-					
		Washington		1	DC	20003
	Relationship:				STATE	
	Connected	Organization	Affiliated Committee	× Joint Fundrais	ina Represent	ative Leadership PAC Sponso
		by name, address	(phone number – optic	onal)		
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Fu		by name, address	; (phone number – optic	onal)		
Fu	ull Name	by name, address	(phone number – optic	onal) 		
Fu	ull Name	by name, address		onal)		
Fu M	ull Name		(phone number – optic	onal)		
Fu M	ull Name			nal)		
Fu M	ull Name					
Fu M. T  Banks	ull Name				Number	
Fu M. T Banks safety	ailing Address				Number	
Fu M T Banks safety Name	ull Name		CITY A		Number	ts funds, holds accounts, rents
Fu M T Banks safety Name	ailing Address		CITY A	Telephone	Number	ts funds, holds accounts, rents
Fu M T Banks safety Name	ull Name          lailing Address         TITLE OR POSITION         s or Other Depositor         deposit boxes or ma         of Bank,         sitory, etc.		CITY A	Telephone	Number	ts funds, holds accounts, rents
Fu M T Banks safety Name	ull Name          lailing Address         TITLE OR POSITION         s or Other Depositor         deposit boxes or ma         of Bank,         sitory, etc.		CITY A	Telephone	Number	ts funds, holds accounts, rents

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	Joint Fundraising	Participant:				
1	1.			FE	C ID number	С
2	2.			FE	C ID number	С
3	3.			FE	C ID number	С
4	4. 🔄 📋 🖂 🖂			FE	C ID number	С
5. Nam	ne of Any Connected C	Drganization, Affili	ated Committee, Joint	t Fundraising	Representativ	e, or Leadership PAC Sponsor
M	Iorelle Victory Fund					
	Mailing Address	P.O. Box 90914				
		Rochester			NY	14609
	Relationship:		CITY A		STATE A	ZIP CODE A
	ignated Agent: Identify Full Name	by name, address	(phone number – optic	onal)		
	Mailing Address					
	Mailing Address					
	Mailing Address		<u> </u>			
	Mailing Address			Telephor	STATE	
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2.					j fe	C ID	number	С				
3.					] FE	C ID	number	С				
4.					FE	C ID	number	С				
					J							
Name of Any Connected	I Organization,	Affiliated (	Committee,	Joint Fu	ndraising	Repr	esentative	e, or Le	eaders	hip P	AC Sp	onsor
New York Majority F	und											
Mailing Address	124 Washin	gton St.										
	Suite 101					1 1				1 1	1 1	1 1
	Foxboro					1		0	2035			
							STATE					
Relationship:			•··· —				• · · · = =					-
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Connecte	-	Affiliate				aising	Representa	ative	Lea	adersh	ip PAC	Spons
Connecte Designated Agent: Identi	-	Affiliate				aising	Representa	ative		adersh	ip PAC	Spons
Connecte Designated Agent: Identi Full Name	-	Affiliate				aising	Representa	ative		adersh	ip PAC	Spons
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		g Participant:														
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2.							FEC	; ID r	number	С					_	
з. ∟							FEC	; ID r	number	С						
4.							FEC	; ID r	number	С						
	f Any Connected	-	Affiliated	d Commi	ttee, Join	nt Fundr	aising F	Repre	esentativ	ve, or	Lea	dersl	nip F	AC S	Spon	isor
Empi	re State Victory	-und														
Ma	ailing Address	PO Box 653	322					I				1 1	I		I	
		Washingtor	<u>ו</u>					 			200	35				
								 c								
Re	elationship:			CITY A												
	ted Agent: Identify	l Organization		CITY	mittee		Fundrais		Represent	tative			lderst		AC S	роі
Designa	Connected	_		ated Com	mittee		Fundrais			tative						por
<b>Designa</b> Full	Connected	_		ated Com	mittee		Fundrais									pon
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<b>Designa</b> Full	ted Agent: Identify	_		ated Com	mittee		Fundrais			tative						pon
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<b>Designa</b> Full Maili	Connected	by name, add		ated Com	mittee	ional)	Fundrais	sing F	Represent			Lea				por

1.				FEC	ID number	С		
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3.				FEC	ID number	С		
4.				FEC	ID number	С		
Name o	of Any Connected (	Drganization, Affili	ated Committee, Joint	Fundraising F	epresentative	e, or Lead	lership F	PAC Spon
Jone	es Victory Fund						1 1 1	
		122 C Street NW						
М	lailing Address							
		Suite 360						
		Washington				2000	)1 	
D	elationship:		CITY 🔺		STATE 🔺		ZIP C	ODE 🔺
			Affiliated Committee	X Joint Fundrais	ing Representa	ative	Leaders	hip PAC Sp
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<b>Designa</b> Full Mail	ated Agent: Identify Name	by name, address			ing Representa	ative	Leaders	
<b>Designa</b> Full Mail	ated Agent: Identify Name	by name, address	(phone number – optio					

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5(g) or (h	b). Joint Fundraising	g Participant:		
	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
6. <b>Na</b>	ame of Any Connected	Organization, Affiliated Committee, Joint Fundrai	sing Representative, o	r Leadership PAC Sponsor
ľ	Josh Riley Victory Fur	nd		
L				
L				
	Mailing Address	600 Pennsylvania Ave SE		
		Unit 15180		
		Washington		20003
	Relationship:		STATE A	ZIP CODE A
	Connected	Organization Affiliated Committee X Joint F	undraising Representative	Leadership PAC Sponsor
8. <b>De</b>	signated Agent: Identify	by name, address (phone number - optional)		
8. <b>De</b>	Full Name	by name, address (phone number - optional)		
8. <b>De</b>		by name, address (phone number – optional)		
8. <b>De</b>	Full Name	by name, address (phone number - optional)		
8. <b>De</b>	Full Name	by name, address (phone number - optional)		
8. <b>De</b>	Full Name			
8. <b>De</b>	Full Name			
8. <b>De</b>	Full Name			
9. <b>Ba</b>	Full Name		ephone Number	
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9. <b>Ba</b> saf Na	Full Name Mailing Address TITLE OR POSITION		ephone Number	
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EC	Form	1S	(Revised	02/2017)
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5(g) c	or (h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
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	4.		FEC ID number	C
6.	-	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	Tom Suozzi Victory F	und		
	Mailing Address	PO Box 669		
		Glen Cove	NY	11542
	Relationship:		STATE	
	Connected	Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Mailing Address	1		
	Maining Address			
	TITLE OR POSITION		STATE A	ZIP CODE
		<u>                 </u> Te	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	<b>ries:</b> List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.			
	Mailing Address			
L		CITY 🔺	STATE A	ZIP CODE

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			FEC	ID number	C
I			FEC	ID number	С
3.			FEC	ID number	С
4.			FEC	ID number	С
-	-	ated Committee, Joint	Fundraising R	epresentativ	e, or Leadership PAC Sponsor
Empire State Strikes B					
Mailing Address	PO Box 65322				
	Washington		1		20035
Relationship:		CITY A		STATE A	
Designated Agent: Identify         Full Name					
Mailing Address					
Maining Address					
TITLE OR POSITION	•			STATE A	ZIP CODE
			Telephone	Number	
Banks or Other Depositori safety deposit boxes or main	es: List all banks on tains funds.	or other depositories in	which the comr	nittee deposi	ts funds, holds accounts, rents
Name of Bank, Depository, etc.					

5(g) or	(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
6. N	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	, or Leadership PAC Sponsor
	Kennedy Victory Fund	-	0	́
	Mailing Address	611 Pennsylvania Avenue SE		
		Ste. 143		
		Washington		20003
	Relationship:	CITY A	STATE A	ZIP CODE
	Connected	Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
- 8. D	Designated Agent: Identify	v by name, address (phone number – optional)		
	Designated Agent: Identify	y by name, address (phone number – optional)		
		by name, address (phone number – optional)		
	Full Name	by name, address (phone number - optional)		
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9. <b>E</b> s	Full Name Mailing Address TITLE OR POSITION		lephone Number	
9. <b>E</b> s	Full Name          Mailing Address         TITLE OR POSITION            Banks or Other Deposition         Ganks or Other Deposition         Ganks of Bank,         Depository, etc.		lephone Number	
9. <b>E</b> s	Full Name          Mailing Address         TITLE OR POSITION            Banks or Other Deposition         Ganks or Other Deposition         Ganks of Bank,         Depository, etc.		lephone Number	

EC Form	1S	(Revised	02/2017)
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1. FEC ID number   2. FEC ID number   3. FEC ID number   4. FEC ID number   C FEC ID number   Mailing Address FEC ID number   PO Box 33079 FIT Le OR POSITION V   C CITY A   STATE A ZIP CODE A   TITLE OR POSITION V CITY A   TITLE OR POSITION V CITY A	or (h). Joint Fundraising	J Participant:		
3	1.		FEC ID number	С
4.       FEC ID number         A.       FEC ID number         Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor         Laura Gillen Victory Fund         Mailing Address       PO Box 33079         Washington       DC         Washington       DC         Washington       DC         Connected Organization       Affiliated Committee         Ø Connected Organization       Affiliated Committee         Ø Joint Fundraising Representative       Leadership PAC Sponsor         Designated Agent: Identify by name, address (phone number – optional)         Full Name       Headership         CITY ▲       STATE ▲         ZIP CODE ▲         TITLE OR POSITION ▼       CITY ▲	2.	<u>                                      </u>	FEC ID number	С
*.	3.		FEC ID number	C
Laura Gillen Victory Fund         Mailing Address         PO Box 33079         Mailing Address         Washington         DC       20033         Washington         DC       20033         Connected Organization       Affiliated Committee         ✓ Joint Fundraising Representative       Leadership PAC Spo         Designated Agent: Identify by name, address (phone number – optional)         Full Name	4.		FEC ID number	С
Laura Gillen Victory Fund         Mailing Address         PO Box 33079         Mailing Address         Washington         DC       20033         Washington         DC       20033         Connected Organization       Affiliated Committee         ✓ Joint Fundraising Representative       Leadership PAC Spo         Designated Agent: Identify by name, address (phone number – optional)         Full Name				
Mailing Address PO Box 33079   Mailing Address PO Box 33079   Washington DC   Washington DC   Washington DC   Washington DC   Connected Organization Affiliated Committee     Mailing Address     Po Box 33079     Washington   Washington   Def   Connected Organization     Affiliated Committee     Joint Fundraising Representative     Leadership PAC Spo     Designated Agent:   Identify by name, address (phone number – optional)     Full Name   Mailing Address     CITY ▲   STATE ▲   ZIP CODE ▲     TITLE OR POSITION ▼     CITY ▲     STATE ▲     ZIP CODE ▲	Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representativ	ve, or Leadership PAC Sponsor
Mailing Address     Washington     Washington     Washington     Washington     Washington     Washington     DC     20033     Pelationship:     CITY ▲     STATE ▲     ZIP CODE ▲     Designated Agent:     Identify by name, address (phone number – optional)     Full Name     Mailing Address     CITY ▲     STATE ▲     ZIP CODE ▲     Designated Agent:     Identify by name, address (phone number – optional)     Full Name     CITY ▲     STATE ▲     ZIP CODE ▲     TITLE OR POSITION ▼     CITY ▲     STATE ▲     ZIP CODE ▲     Image: Complex in the image: City ▲     Image: City ▲     STATE ▲     ZIP CODE ▲     TITLE OR POSITION ▼	Laura Gillen Victory F	und		
Mailing Address     Washington     Washington     Washington     Washington     Washington     Washington     DC     20033     Pelationship:     CITY ▲     STATE ▲     ZIP CODE ▲     Designated Agent:     Identify by name, address (phone number – optional)     Full Name     Mailing Address     CITY ▲     STATE ▲     ZIP CODE ▲     Designated Agent:     Identify by name, address (phone number – optional)     Full Name     CITY ▲     STATE ▲     ZIP CODE ▲     TITLE OR POSITION ▼     CITY ▲     STATE ▲     ZIP CODE ▲     Image: Complex in the image: City ▲     Image: City ▲     STATE ▲     ZIP CODE ▲     TITLE OR POSITION ▼				
Mailing Address     Washington     Washington     Washington     Washington     Washington     Washington     DC     20033     Pelationship:     CITY ▲     STATE ▲     ZIP CODE ▲     Designated Agent:     Identify by name, address (phone number – optional)     Full Name     Mailing Address     CITY ▲     STATE ▲     ZIP CODE ▲     Designated Agent:     Identify by name, address (phone number – optional)     Full Name     CITY ▲     STATE ▲     ZIP CODE ▲     TITLE OR POSITION ▼     CITY ▲     STATE ▲     ZIP CODE ▲     Image: Complex in the image: City ▲     Image: City ▲     STATE ▲     ZIP CODE ▲     TITLE OR POSITION ▼		PO Box 33079		
Relationship:       CITY ▲       STATE ▲       ZIP CODE ▲         Connected Organization       Affiliated Committee       X Joint Fundraising Representative       Leadership PAC Spo         Designated Agent:       Identify by name, address (phone number – optional)       Identify by name, address (phone number – optional)         Full Name	Mailing Address			
Relationship:       CITY ▲       STATE ▲       ZIP CODE ▲         Connected Organization       Affiliated Committee       X Joint Fundraising Representative       Leadership PAC Spo         Designated Agent:       Identify by name, address (phone number – optional)       Identify by name, address (phone number – optional)         Full Name				
Connected Organization       Affiliated Committee       ✓ Joint Fundraising Representative       Leadership PAC Spo         Designated Agent:       Identify by name, address (phone number – optional)         Full Name		Washington		
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Designated Agent: Identify by name, address (phone number – optional)         Full Name         Mailing Address         Image: State Image: St	Connected	Organization Affiliated Committee X	Joint Fundraising Represent	tative
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Name of Bank, Depository, etc.				
Name of Bank, Depository, etc.				

5(g) or (l	h). Joint Fundraisin	g Participant:		
	1		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
6. <b>N</b>	ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Benresentative	or Leadershin PAC Sponsor
0. 10	John Avlon Victory Fu	-	along hepresentative	
	Mailing Address	611 Pennsylvania Avenue SE		
		Suite 143		
		Washington		20003
	Relationship:	CITY A	STATE	
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8. <b>D</b> e	esignated Agent: Identify	v by name, address (phone number - optional)		
8. De	esignated Agent: Identify	by name, address (phone number – optional)		
8. <b>D</b> e		by name, address (phone number – optional)		
8. <b>D</b> e	Full Name	<pre>v by name, address (phone number - optional)</pre>		
8. De	Full Name	<pre>v by name, address (phone number - optional) </pre>		
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9. <b>B</b> i	Full Name		lephone Number	
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5(g) or (ł	h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
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	3.		FEC ID number	C
	4.		FEC ID number	С
6. <b>N</b> a	ame of Any Connected (	Organization, Affiliated Committee, Joint Fundr	raising Representative	. or Leadership PAC Sponsor
	Lubin Victory Fund			· · · ·
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l				
	Mailing Address	499 S Capitol St SW		
		Suite 420		
		Washington		20003
	Relationship:	CITY A	STATE A	ZIP CODE A
	Connected	Organization	Fundraising Representa	tive Leadership PAC Sponsor
8. <b>D</b> e	esignated Agent: Identify	by name, address (phone number - optional)		
8. <b>D</b> e	<b>esignated Agent:</b> Identify	by name, address (phone number – optional)		
— 8. <b>D</b> e		by name, address (phone number - optional)		
 8. De	Full Name	by name, address (phone number - optional)		
— 8. De	Full Name	by name, address (phone number - optional)		
— 8. De	Full Name			
 8. <b>D</b> e	Full Name		I I I I I I I I I I I I I I I I I I I	
8. De	Full Name			
9. <b>B</b> a	Full Name		elephone Number	
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9. <b>B</b> a sa Na	Full Name		elephone Number	
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