**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Janai Meeks-Milojevich Global Child Support and Prosperity Group 2171 Fig Lane ADDRESS (number and street) **STE 200** (Check if address is changed) Corning 96021 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address Advo.jv.casa@gmail.com is changed) Optional Second E-Mail Address D.Milojevich4u@proton.me COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00867416 FEC IDENTIFICATION NUMBER 3. X 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. Type or Print Name of Treasurer Milojevich, D.,, 01 28 2024 Signature of Treasurer Milojevich, D., , , 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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5. TYPE OF COMMITTEE:			
Candidate Committee:			
(a) X This committee is a prin	ncipal campaign committee. (Complet	e the candidate information	below.)
(b) This committee is an au information below.)	uthorized committee, and is NOT a p	rincipal campaign committee	e. (Complete the candidate
Name of Candidate Meeks-Milo	jevich, Janai, , ,		
Candidate Party Affiliation  AIP	Office Sought: X House	Senate F	State CA President District 01
(c) This committee support	s/opposes only one candidate, and is	NOT an authorized commi	ttee.
Name of Candidate			
Party Committee:			
(d) This committee is a	(National, State or subordinate) commi	ttee of the	(Democratic, Republican, etc.) Party
<b>Political Action Committee</b>	(PAC):		
(e) This committee is a sep	parate segregated fund. (Identify conr	nected organization on line 6	S.) Its connected organization is a:
Corporation	Corporation	w/o Capital Stock	Labor Organization
Membership Organ	nization Trade Associ	ation	Cooperative
In addition, th	is committee is a Lobbyist/Registrant	PAC.	
(f) This committee supports committee. (i.e., noncon	s/opposes more than one Federal ca	ndidate, and is NOT a sepa	rate segregated fund or party
In addition, th	is committee is a Lobbyist/Registrant	PAC.	
In addition, th	is committee is a Leadership PAC. (I	dentify sponsor on line 6.)	
(g) This committee is an in	dependent expenditure-only political	committee (Super PAC).	
In addition, th	is committee is a Lobbyist/Registrant	PAC.	
(h) This committee is a pol	itical committee with both contribution	n and non-contribution accou	unts (Hybrid PAC).
In addition, th	is committee is a Lobbyist/Registrant	PAC.	
Joint Fundraising Represer	ntative:		
(i) This committee collects	contributions, pays fundraising expers, at least one of which is an author	•	·
(1)	contributions, pays fundraising expers, none of which is an authorized co	· ·	•
Committees Participating in Committees	Joint Fundraiser		
• •	PORT AND PROSPERITY GROU	C	C00865576
2.   AMERICAN INDEPE	NDENT VOTER ASSOCIATIO	N	C00848655

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V	Vrite or Type Committee Name  Janai Meeks-Mil	ojevich Global Child Support and Prosp	perity Group
6.		ganization, Affiliated Committee, Joint Fundraising Representa	
	NONE		1
	Mailing Address		
		CITY ▲ STATI	E ▲ ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Repre	esentative Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the p	person in possession of committee
	Milojevich,	D., , , ,	
	Full Name	2171 Fig Lane Ste 200	
	Mailing Address	217111g Laire Ste 200	
		Corning	96021
		CITY ▲ STAT	E ▲ ZIP CODE ▲
	Title or Position ▼		
	Co Developer	Telephone number	602 - 946 - 8766
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the communications ssistant treasurer).	nittee; and the name and address of
	Full Name Milojevich,	D., , ,	
	of Treasurer	<sub>1</sub> 2171 Fig Lane Ste 200	
	Mailing Address		
		Corning	A 96021 -
	Title or Position <b>▼</b>	CITY ▲ STATE	E ▲ ZIP CODE ▲
			602  -  946  -  8766

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Full Name of Designated Agent	Miller, Gene, S, ,		
Mailing Address	2171 Fig Lane Ste 200		
	STE 200		
	Corning	CA 96021	
Title or Position ▼		STATE A	ZIP CODE ▲
		ber 602	946   -   8766
Banks or Other I safety deposit box	Depositories: List all banks or other depositories in which the committee es or maintains funds.	e deposits funds, hold	ls accounts, rents
Name of Bank, De	epository, etc.		
	Go2Bank		
Mailing Address	P.O. Box 1070		
	West Chester	OH 45071	
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Do	epository, etc.		
Mailing Address			
	CITY ▲	STATE A	ZIP CODE ▲

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

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(h). <b>Joint Fundraising</b>	Participant:			
GRASSROOTS ACTION  1	FUND	FEC II	O number	C C00808584
2.		FEC II	O number	С
3.		FEC II	O number	C
4.		FEC II	O number	C
Name of Any Connected C	Organization, Affiliated Committee, Join	t Fundraising Re	presentativ	e, or Leadership PAC Sponso
Mailing Address				
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
Bonta, And	dres, , ,		1	
Mailing Address	1300 I Street			
	Sacramento		CA	95824
TITLE OR POSITION •	CITY A		STATE A	ZIP CODE ▲
NAAG		Telephone N	lumber	916
Banks or Other Depositorions of the safety deposit boxes or main	es: List all banks or other depositories in	n which the comm	ittee deposi	ts funds, holds accounts, rents
salety deposit boxes or mair	ntains funds.			
Name of Bank,	ntains funds.			
Name of Bank, Depository, etc.	ntains funds.			
Name of Bank,	ntains funds.			
Name of Bank, Depository, etc.	ntains funds.			
Name of Bank, Depository, etc.	city A		STATE A	ZIP CODE A