FEC FORM 1		STATEME ORGANIZ		Off	PAGE 1 / 4			
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5				
	a Bac							
		2011 Concord Dike #8020 S						
ADDRESS (number a	nd street)	3911 Concord Pike #8030 SMB #12103						
C ← (Check if a is changed)		Wilmington		DE 1980 STATE ▲	03 − [ZIP CODE ▲			
COMMITTEE'S E-M/		SS						
(Check if a is changed		silver0815@gmail.com) 					
	-)	Optional Second E-Mail Ad silver0815@gmail.co	ldress om					
COMMITTEE'S WEE	address	DRESS (URL)	j 					
2. DATE	9 / D 9 08	D / Y Y Y Y 2020						
3. FEC IDENTIFIC	CATION NU		00757666					
4. IS THIS STATE	MENT	NEW (N) OR	× AMENDED (A)					
I certify that I have e	examined th	is Statement and to the best	t of my knowledge and belief i	it is true, correct and	complete.			
Type or Print Name	of Treasurer	Silver, Michael, , ,						
Signature of Treasure	ər Silver,	Michael, , ,	[Electronically Filed]	Date 10	20 / Y Y Y Y Y 20 2020			
NOTE: Submission of			may subject the person signing		penalties of 2 U.S.C. §437g.			
Office Use Only			For further information Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)			

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FEC Form 1 (Revised 02/2009) Page 2 TYPE OF COMMITTEE Candidate 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 candidate information below.) Name of Candidate Party Affiliation Office Sought: (c) This committee supports/opposes only one candidate, and is NOT an authorized 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 candidate information below.) Name of Candidate Office Party Affiliation Office Sought: House Senate President District						
 (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 candidate information below.) Name of Candidate Candidate Office Sought: House Senate President District 						
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Candidate Office Sought: House Senate President State District						
Information below.) Name of Candidate Candidate Party Affiliation Office Sought: House Senate President District						
Candidate Candidate Party Affiliation Office Sought: House Senate President District						
Party Affiliation Sought: House Senate President District						
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate Image: Candidate <th< td=""></th<>						
Party Committee:						
(d) This committee is a (National, State or subordinate) committee of the Publican, etc.) Pa						
Political Action Committee (PAC):						
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization						
Corporation Corporation w/o Capital Stock						
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 segregated fund or p committee. (i.e., nonconnected committee)						
In addition, this committee is a Lobbyist/Registrant PAC.						
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fundraising Representative:						
(g) 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.						
(h) 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						
1 FEC ID number						
2 FEC ID number C						
3. FEC ID number						
4 FEC ID number C						

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Write or Type Committee Name

Win America Back PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

	3911 Concord Pike #8030 SMB #12103	
Mailing Address		
		DE 19803
	CITY	STATE ZIP CODE
 Custodian of Re books and record 	cords: Identify by name, address (phone number optional) and s.	position of the person in possession of committee
	, Silver, Michael, , ,	
Full Name		
Mailing Address	10310 Walavista Rd	
	Los Angeles	CA 90064
Title or Position	CITY	STATE ZIP CODE
Vice President		213 379 3251

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).

Telephone number

Full Name of Treasurer	Silver, Michael, , ,
Mailing Address	10310 Walavista Rd
	Los Angeles
	CITY STATE ZIP CODE
Title or Position Vice President	Telephone number 213 379 3251

Full Name of Designated Agent	Rosenblatt, Benjamin, , ,										
Mailing Address	6438 Lunita Ro	1 									
	<mark>∣ Malibu</mark>				C	A		90265		-	
		CITY			STA	TE			ZIP CC	DE	

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.

Mailing Address	15 South 20th Street	
	Birmingham	AL 35233
	CITY	STATE ZIP CODE
Name of Bank, [Depository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE