

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Serve America Women's Victory Fund

ADDRESS (number and street)

PO Box 2013

(Check if address is changed)

Salem

CITY ▲

MA

STATE ▲

01970

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Darryl@CommonCentsConsulting.net

Optional Second E-Mail Address

Tara@CommonCentsConsulting.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

None

2. DATE

MM / DD / YYYY  
07 / 06 / 2018

3. FEC IDENTIFICATION NUMBER ▶

C C00682328

4. 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 Tattrie, Darryl, , ,

Signature of Treasurer

Tattrie, Darryl, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
07 / 06 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

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 candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State  District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

**Party Committee:**

- (d)  This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its 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 segregated fund or party 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. SERVE AMERICA PAC FEC ID number  C  C00571174
2. AMY MCGRATH FOR CONGRESS FEC ID number  C  C00646745
3. MIKIE SHERRILL FOR CONGRESS FEC ID number  C  C00640003
4. CHRISSEY HOULAHAN FOR CONGRESS FEC ID number  C  C00637371

Write or Type Committee Name

# Serve America Women's Victory Fund

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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

Full Name Tattie, Darryl, , ,

Mailing Address PO Box 2013

Salem

MA

01970

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 602 - 283 - 9858

**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 Tattie, Darryl, , ,

Mailing Address PO Box 2013

Salem

MA

01970

Title or Position Treasurer

CITY

STATE

ZIP CODE

Telephone number 602 - 283 - 9858

Full Name of Designated Agent

Gilligan, Tara, , ,

Mailing Address

PO Box 2013

Salem

MA

01970

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

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.

Amalgamated Bank

Mailing Address

275 7th Ave

New York

NY

10001

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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

5(g) or (h).

Joint Fundraising Participant:

- 1. ELISSA SLOTKIN FOR CONGRESS
- 2. GINA ORTIZ JONES FOR CONGRESS
- 3. ELAINE FOR CONGRESS
- 4. MAURA SULLIVAN FOR CONGRESS

FEC ID number	C00650150
FEC ID number	C00652297
FEC ID number	C00664375
FEC ID number	C00658724

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

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

Mailing Address

Mailing Address fields

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

- Connected Organization
- Affiliated Committee
- Joint Fundraising Representative
- Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

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.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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

5(g) or (h). Joint Fundraising Participant:

- 1. MJ FOR TEXAS
- 2. SPANBERGER FOR CONGRESS
- 3.
- 4.

- FEC ID number C C00649350
- FEC ID number C C00649913
- FEC ID number C
- FEC ID number C

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

Name of organization field

Mailing Address field

Relationship: CITY STATE ZIP CODE and checkboxes for Connected Organization, Affiliated Committee, Joint Fundraising Representative, Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Designated Agent fields: Full Name, Mailing Address, TITLE OR POSITION, CITY, STATE, ZIP CODE, 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.

Banks or Other Depositories fields: Name of Bank, Depository, etc., Mailing Address, CITY, STATE, ZIP CODE