Image# 202107269451988557				07/26/2021 13 : 03
FEC FORM 1	STATEMEN ORGANIZ		Offic	PAGE 1 / 5
1. NAME OF	(Check if name	Example:If typing, type		
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
Drain the DC Sw	amp PAC			
	5 Halifax Ct			
ADDRESS (number and street)				
 (Check if address is changed) 				
	Marlton		NJ 08053	
	CITY ▲		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE				
 (Check if address is changed) 	liz@lizcurtisassociates.	.com		
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 07 / 20				
3. FEC IDENTIFICATION N		00662072		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined th	nis Statement and to the best	of my knowledge and belief i	t is true, correct and c	omplete.
Type or Print Name of Treasure	r Curtis, Elizabeth, , ,			
Signature of Treasurer	s, Elizabeth, , ,	[Electronically Filed]	Date 07	26 / Y Y Y Y 2021
NOTE: Submission of false, erron		may subject the person signing ON SHOULD BE REPORTED V		enalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	ion F	EC FORM 1 (Revised 06/2012)

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FEC	C Form 1 (Revised 02/2009)	Page 2
TYPE C	DF COMMITTEE	
Candi	date 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. (Comp information below.)	plete the candidate
Name o Candida		
Candida Party Af		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida		
Party	Committee:	
(d)		Democratic, Republican, etc.) Party
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is
	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 seg committee. (i.e., nonconnected committee)	gregated 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.)	
Joint F	undraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
(Committees Participating in Joint Fundraiser	
	1 FEC ID number C	
	2 FEC ID number C	
3	3 FEC ID number C	
2	4 FEC ID number C	

I

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Drain the DC Swamp PAC

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

N					
	Mailing Address				
		CITY		STATE	ZIP CODE
	Relationship: Connected	Organization Affiliated Committee	Joint Fundraising	Representative	Leadership PAC Sponsor
7.	Custodian of Records: Iden books and records.	tify by name, address (phone number op	tional) and positi	ion of the person in p	oossession of committee
	Curtis, Eliza	abeth, , ,			
	Mailing Address	5 Halifax Ct			
		Mariton		NJ 08053	;
	Title or Position	CITY		STATE	ZIP CODE
			Telephone num	1ber	
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the ssistant treasurer).	treasurer of the	committee; and the	name and address of

Full Name	Curtis, Elizabeth, , ,																					
of Treasurer																						
Mailing Address	5 Halifax Ct																					
																1						
	Marlton										L	ŊJ		08	805	3						
	Marlton	_ _	C	ITY							 S1	NJ ATE		08	805	3	ZI	L P C	_ ;00			
Title or Position	Marlton	_ _	C	ITY							 S1			08	805	3	ZI	P C				
Title or Position			C	ITY	<u> </u>	 T	elep		ne i	num		ATE	1	0	805 -	3	ZI	P C		DE		

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Full Name of Designated Agent																											1				_
Mailing Address																															
																														1	
	CITY												9	STA	ΤE				ZI	PC	OD	Ε									
Title or Position																															
															Tele	eph	ione	e ni	umb	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.

Wells	Fargo								
Mailing Address	501 W. Rt. 70								
	Mariton	NJ	08053						
	CITY	STATE	ZIP CODE						
Name of Bank, Depository, etc.									
Chain	Bridge Bank								

	1445A LAUGHLIN AVE		
Mailing Address			
			22101
	CITY	STATE	ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: