## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Slotkin Stevens Victory 600 Pennsylvania Avenue SE ADDRESS (number and street) #15180 (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS fec@capcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 29 2021 C00729772 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. Solander, Kristin, , , Type or Print Name of Treasurer Solander, Kristin, , , [Electronically Filed] 01 29 2021 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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		OMMITTEE	
Can	didate	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. (Complinformation below.)	ete the candidate
Nam Cand	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)			emocratic, epublican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected 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 segrommittee. (i.e., nonconnected committee)	regated 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.)	
Join	t Fund	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	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.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	Haley Stevens for Congress FEC ID number C C0063	8650
	2.	Elissa Slotkin for Congress  FEC ID number C C0065	0150
	3.	FEC ID number	
	4.		

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Write or Type Committee		-
Slotkin Steve	ens Victory	
	ted Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE		
Mailing Address		
,		
	CITY STATE	ZIP CODE
	nected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records. books and records.	: Identify by name, address (phone number optional) and position of the persor	n in possession of committee
Solar Full Name	nder, Kristin, , ,	
Mailing Address	600 Pennsylvania Avenue SE	
ag . taa. ees	#15180	
	Washington DC 2	0003
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	_ 544 _ 6960
Treasurer: List the nam any designated agent (6	ne and address (phone number optional) of the treasurer of the committee; and e.g., assistant treasurer).	the name and address of
Full Name Solar of Treasurer	nder, Kristin, , ,	
Mailing Address	600 Pennsylvania Avenue SE	
	<b>#15180</b>	
		0003
Title or Position Treasurer	CITY STATE	ZIP CODE
	Telephone number	]-[

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	II I (NEVISEU UZ/ZUUS)	raye 4
Full Name of Designated Agent		
Mailing Address		
•		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
safety deposit be Name of Bank, Mailing Address	Amalgamated Bank	
Mailing Madress		
	1	
	Washington DC i	20006
	Washington DC CITY STATE	20006 ZIP CODE
Name of Bank,	CITY STATE	
Name of Bank, I	CITY STATE	ZIP CODE
Name of Bank, Mailing Address	CITY STATE  Depository, etc.	ZIP CODE
	CITY STATE  Depository, etc.	ZIP CODE
	CITY STATE  Depository, etc.	ZIP CODE