

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

MS RAND FOR PRESIDENT

ADDRESS (number and street)

4034 SE HOLGATE BLVD



(Check if address
is changed)

PORTLAND

CITY ▲

OR

STATE ▲

97202

- 3165

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address
is changed)

RACHEL.LYDIA.RAND@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

https://rachellydiarand.github.io/ms-rand/

2. DATE

MM / DD / YYYY
12 / 22 / 2025

3. FEC IDENTIFICATION NUMBER ►

C 00885376

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 RACHEL LYDIA RAND

Signature of Treasurer

Rachel Lydia Rand

Date

MM / DD / YYYY
12 / 22 / 2025

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
Use
Only

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

FEC FORM 1
(Revised 03/2022)

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 RACHEL LYDIA RAND

Candidate Party Affiliation REP 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.)

- (g) ☐ This committee is an independent expenditure-only political committee (Super PAC).

☐ In addition, this committee is a Lobbyist/Registrant PAC.

- (h) ☐ This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

☐ In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

- (i) ☐ 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.
- (j) ☐ 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. _____
2. _____

C _____
C _____

2025 RELEASE UNDER E.O. 14176

Write or Type Committee Name

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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

Full Name | RAGHEL LYDIA RAND

Mailing Address

4034 SE HOLGATE BLVD
PORTLAND OR 97202 - 3165

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

PRESIDENT _____ Telephone number _____-_____-_____

Full Name of Treasurer	RACHEL LYDIA RAND
---------------------------	-------------------

Mailing Address

4034 SE HOLGATE BLVD
PORTLAND OR 97202 - 3165

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

PRESIDENT _____ Telephone number _____-_____-_____

Full Name of
Designated
Agent

RACHEL LYDIA RAND

Mailing Address

4034 SE HOLGATE BLVD

PORTLAND

CITY ▲

OR

STATE ▲

97202

- 3165

ZIP CODE ▲

Title or Position ▼

PRESIDENT

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.

NONE AT THE MOMENT

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

2025-01-01 10:50:10 AM

Optional Supplemental Information
for Lines 5(i) or (j), 6, 8 and/or 9

5(i) or (j). Joint Fundraising Participant:

1. _____
2. _____
3. _____
4. _____

FEC ID number

C _____

FEC ID number

C _____

FEC ID number

C _____

FEC ID number

C _____

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

Mailing Address

_____-____

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 RACHEL LYDIA RAND

Mailing Address 4034 SE HOLGATE BLVD

PORTLAND OR 97202 - 3165

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

PRESIDENT 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 ▲

Ms Rand for President
ATTN: Rachel Lydia Rand
4034 SE Holgate Blvd
Portland, OR 97202-3165

PORTLAND OR FEDEC 972

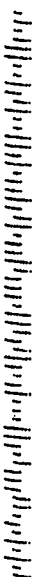
27 DEC 2025 PM 5 L



Federal Elections Commission
1050 First St. N.E.
Washington, D.C. 20463

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1/5/26

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Service (Specify):

Shipping Date

Date of Receipt

Next Business Day Delivery

☐☐

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Date of Receipt

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Date of Receipt

☐

Received from Electronic Filing Office

Date of Receipt

☐

Other (Specify):

Date of Receipt or Postmarked


PREPARER

1/5/26
DATE PREPARED

(4/2023)