Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Opportunity Financial, LLC Credit Access PAC 130 E. Randolph St. 33rd Fl. ADDRESS (number and street) (Check if address is changed) Chicago 60601 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS CreditAccessPAC@opploans.com (Check if address is changed) Optional Second E-Mail Address FECINFO@pass1.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 04 2020 C00757401 FEC IDENTIFICATION NUMBER 3. 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. Tallman, Vincent, , , Type or Print Name of Treasurer Tallman, Vincent,,, [Electronically Filed] Date 09 2020 Signature of Treasurer 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

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
	PE OF COMMITTEE					
	naidate	Committee:				
(a)	ш	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate			
	ne of didate					
	didate y Affiliatio	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
	ne of didate					
Par	rty Con	nmittee:				
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.			
Pol	itical A	ction Committee (PAC):				
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nected 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.)				
Joir	nt 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.	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				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

FF0 F 1 /D	02/2000)	D
FEC Form 1 (Revised) Write or Type Committee Name		Page 3
•	ancial, LLC Credit Access PAC	
	<u>·</u>	or Londorchin DAC Spansor
	Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
Opportunity Financial,	<u> </u>	
Mailing Address	130 E. Randolph St. 33rd Fl.	
	Chicago	60601
	CITY STATE	ZIP CODE
Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representat	tive Leadership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number optional) and position of the pe	erson in possession of committee
Tallman, \	/incent, , ,	
Full Name	1950 Roland Clarke PI Ste 300	
Mailing Address		
	Poster	,20191
	Reston	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	03 476 - 3070
3. Treasurer : List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name Tallman, V	/incent, , ,	ı
of Treasurer	MOTO Delegal Clerks DI Cts 200	
Mailing Address	1950 Roland Clarke PI Ste 300	
	Reston	20191
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	03 476 3070

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Full Name of Designated Agent	Shah, Shiven, , ,	, , , , , , , , , , , , , , , , , , ,				
Mailing Address	130 E. Randolph St. 33rd Fl.					
-						
	Chicago IL 60601 CITY STATE ZIP	P CODE				
Title or Position Assistant Treasu	urer	2 5900				
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.						
	Capital Bank					
Mailing Address	10700 Parkridge Blvd Ste 180					
	Reston VA 20191					
	CITY STATE ZIF	P CODE				
Name of Bank, [Depository, etc.					
Mailing Address						
	CITY STATE ZIF	P CODE				