Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. We Invest in Lives and Dreams PAC 600 Pennsylvania Avenue SE ADDRESS (number and street) #15180 (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address fec@capcompliance.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00776310 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 Nissen, Melissa, , Date 04 11 2024 Signature of Treasurer Nissen, Melissa, , , 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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	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 candinformation below.)	didate
	Name of Candidate	
	Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Janot
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican, etc.)	Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	anization is a:
	Corporation Corporation w/o Capital Stock Labor Organiz	ation
	Membership Organization Trade Association Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund committee. (i.e., nonconnected committee)	or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	X 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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	e political
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	e political
	Committees Participating in Joint Fundraiser	
	1. C	

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٧	Vrite or Type Committee Name			
	We Invest in Live	es and Dreams PAC		
6.	=	rganization, Affiliated Committee, Joint F	Fundraising Representative, or Le	adership PAC Sponsor
	Wild, Susan, , ,			
	Mailing Address	1636 N Cedar Crest Blvd		
		Num 183		
		Allentown	PA 18	3104
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising Representative	X Leadership PAC Sponso
		- manual enganamen	- and a second s	Z zamananji wa apana
7 .	Custodian of Records: Identi books and records.	ify by name, address (phone number optic	onal) and position of the person in pos	ssession of committee
	Nissen, Me	elissa, , ,		
	Full Name			
	Mailing Address	600 Pennsylvania Avenue SE		
		#15180		
		Washington	DC 20	0003
	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
	Treasurer	1		_ 544 _ 6960
			Telephone number	
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	ne treasurer of the committee; and t	he name and address of
	Full Name Nissen, Me of Treasurer	:lissa, , ,		
		600 Pennsylvania Avenue SE		
	Mailing Address	#15180		
		Washington	DC 20	0003
	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
	Treasurer		Telephone number	_ 544 _ 6960

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Full Name of Designated			
Agent			
Mailing Address			
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
		elephone number	
	Depositories: List all banks or other depositories in which xes or maintains funds.	the committee deposits fun	ds, holds accounts, rents
Name of Bank, I	Depository, etc.		
	Amalgamated Bank		
Mailing Address	1825 K St NW		
	Washington	DC	20006
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, [Depository, etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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(h). Joint Fundraisi	.9		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	600 Pennsylvania Avenue SE		
	#15180		
	Washington	DC	20003
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi	d Organization Affiliated Committee X Joy by name, address (phone number – optional)		ative Leadership PAC Spo
			ative Leadership PAC Spo
Pesignated Agent: Identi			ative Leadership PAC Spo
Pesignated Agent: Identi			Leadership PAC Spo
Pesignated Agent: Identi Full Name Mailing Address	y by name, address (phone number – optional)		Leadership PAC Spo
Pesignated Agent: Identi	y by name, address (phone number – optional)		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A