

RECEIVED FEC MAILCENTER

2023 MAY 16 PM 12: 26

23123 State Rd 7, Ste 236B Boca Raton, FL 33428

Federal Election Commission 1050 First Street, NE Washington, DC 20463

Re: Termination Report

ID: C00816553

May 9, 2023

To Whom It May Concern:

Markey Committee and Committee

Attached are the Form 1 Amendment and Loan Forgiveness letter requested in your response to my termination report.

Please advise if anything else is required.

Sincerely,

8/2

Joe Budd

THIS BUDD'S FOR YOU

2025 05 16 05 00442589

FEC

RECEIVED FEC MAILCENTER

FORM 1		ORGANIZATION		2023 116	Office Use Only		
1. NAME OF COMMITTEE (in	n full)		(Check if name s changed)	Example:If typing, type over the lines.	12FE4M5		
Joe Buddifor Cor	ngress _i	1 1 1	<u> </u>				
			1 1 1 1 1 1	 			
ADDRESS (number a	ind street)	23123	State Road 7				
☐ ◀ (Check if is changed		Suite 2	236B	<u> </u>			
		Boca F	Raton i i i i ⊓Y ▲	 	FL STATE ▲	33428	
COMMITTEE'S E-MA	AIL ADDR	ESS					
✓ (Check if is change		phoson	n@joebudd;cqm		111111		
		Optional	Second E-Mail Ad	dress		1	
(Check if is change	2111 €	رود زرون <u>المل</u>	CDQAde () **	1930 (B) (B) (B)			
2. DATE 05	/ 09	, <u> </u>	23				
3. FEC IDENTIFIC	CATION N	IUMBER B	Coo	816553			
4. IS THIS STATE	MENT [NEW	(N) OR	AMENDED (A	A)		
I certify that I have	examined	this Stateme	ent and to the best	of my knowledge and beli	ief it is true, correct a	and complete.	
Type or Print Name	of Treasur	er <u>Joe</u>	Budd		· ····		
Signature of Treasur	er	<u> </u>	nen		Date 05	09 2023	
NOTE: Submission of	false, erro			may subject the person sign		the penalties of 52 U.S.C. §30109	
Office Use				For further informati Federal Election Com	mission	FEC FORM 1 (Revised 03/2022)	

EC Form 1 (Revised 03/2022)	Page 2		
TYPE OF COMMITTEE:			
Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate information below.)			
Name of Candidate			
Candidate Party Affiliation Rep Sought: House Senate Pr	State FL resident District 23		
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	L		
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		
	m		
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 separ committee. (i.e., nonconnected committee)	rate segregated 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.)			
(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 accou	nts (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 proce committees/organizations, at least one of which is an authorized committee of a federal of	· ·		
(i) This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, none of which is an authorized committee of a federal candidate.	•		
Committees Participating in Joint Fundraiser			
1.[

FEC Form 1 (Revised	03/2022)		Page 3
Write or Type Committee Nam	ne		
Joe Budd for Congress			- <u>.</u>
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundrals	ing Representative, or Le	adership PAC Sponsor
None			لسيسي
Mailing Address			
	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-
	CITY ▲	STATE ▲	ZIP CODE ▲
Relationship: Connecte	ed Organization Affiliated Organization Joint F	Fundraising Representative	Leadership PAC Sponso
Custodian of Records: Ide books and records.	ontify by name, address (phone number optional) and	position of the person in po	ssession of committee
Full Name Joe Bu	ıddı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı		
Mailing Address	23123 State Road 7		
	Suite 236B		
	Boca Raton	FL 3:	3428 - -
•	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position ▼			
Treasuren	Telep	hone number 561	- 609 - 2294
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number - optional) of the treasure, assistant treasurer).	rer of the committee; and t	the name and address of
Full Name of Treasurer Joe Bu	ı dd ı , , , , , , , , , , , , , , , , , , ,		
Mailing Address	23123 State Road 7		
	Suite 236B		
	Bpca Raten	FL 3:	3428 -
	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position ▼			
Treasurer		hone number 561	- 609 - 2294

				ب ٦
_	FEC Form 1	(Revised 03/2022)		Page 4
	Full Name of Designated Agent	Joe Budd		
	Mailing Address	23123 State Road 7		
		Suite 236B		
		Boca Raton	FL	33428
	The se Decision	CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position		mber 56	1 - 609 - 2294
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.			
		Bank of America		
	Mailing Address	23123 State Road 7, , , , , , , , , , , , , , , , , , ,		
		Boca Raton	FL	33428
		CITY ▲	STATE A	ZIP CODE ▲
	Name of Bank, I	Depository, etc.		
		<u> </u>		
	Mailing Address			
			<u></u>	
				<u> </u>
		CITY ▲	STATE A	ZIP CODE ▲

FEC For	m 1S	(Revised	03/2022)
---------	------	----------	----------

ا 	FEC Form 1S (Revised 03/2	Optional Supplemental Information for Lines 5(i) or (j), 6, 8 and/or 9	Page of
5(i) c	or(j). Joint Fundralsin	g Participant:	
	1	FEC ID numbe	C
	2.	FEC ID numbe	' <u>C</u>
	3.	FEC ID numbe	C
	4.	FEC ID numbe	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representation	tive, or Leadership PAC Sponsor
	L		
	Mailing Address		
	Relationship:	CITY ▲ STATE	ZIP CODE ▲
	Connected	d Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number ~ optional)	
	Full Name		
	Full Name		
		CITY A STATE A	ZIP CODE A
	Mailing Address	CITY A STATE A	ZIP CODE A
9.	Mailing Address TITLE OR POSITION	CITY A STATE A STATE A Telephone Number Pries: List all banks or other depositories in which the committee depositions in the committee deposition in the commit	
9.	Mailing Address TITLE OR POSITION Banks or Other Deposito	CITY A STATE A STATE A Telephone Number Pries: List all banks or other depositories in which the committee depositions in the committee deposition in the commit	
9.	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank,	CITY A STATE A STATE A Telephone Number Pries: List all banks or other depositories in which the committee depositions in the committee deposition in the commit	

CITY A

STATE A

ZIP CODE A



WEST PALM BCH FL 334 9 MAY 2023 PM 2 L

Lincoln Financial Securities Corporation 23123 State Road 7

Financial Securities® A member of Lincoln Financial Group

Suite 236 B Boca Raton, FL 33428

Branch Manager

Joseph E. Budd, CRPC®

FEDERAL ELECTION COMPRESSION WASHINGTON, DC 20463 1050 FIRST STREET, NE

PH 12: 26

2023 HAY 16

2046G-

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.			
Hand Delivered	Date of Receipt		
USPS First Class Mail Postmarked 5/9/23	Date of Receipt		
USPS Registered/Certified	Postmarked (R/C)		
USPS Priority Mail	Postmarked		
USPS Priority Mail Express	Postmarked		
Postmark Illegible			
No Postmark			
Overnight Delivery Service (Specify):	Shipping Date Next Business Day Delivery		
Received from House Records & Registration	Date of Receipt Office		
Received from Senate Public Records Office	Date of Receipt		
Received from Electronic Filing, Office	Date of Receipt		
Other (Specify):	Date of Receipt or Postmarked		
PREPARER (3/2015)	5/16/2-3 DATE PREPARED		