Only

# STATEMENT OF

PAGE 1 / 13 =

FORM 1		O	RGAN	IZAT	ГІС	N													
1 NAME OF			(Ob a ale if a a a	_	- Fixon	mla If i		t a	4	-	-	-	Offi	ce U	se Or	ly			
1. NAME OF COMMITTEE (ir	full)		Check if names changed)			the line	yping, es.	туре		12I	E4	M5		_					
Colin Allred	for Se	nate																	
ADDRESS (number a	nd street)	PO Box	601631 																
(Check if a is changed																			
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		С	ITY ▲							STAT	E 🔺				ZI	P CC	DDE 4		_
COMMITTEE'S E-MA	AIL ADDR	ESS																	
(Check if a is changed		allred@	mbacg.com	1 1 1	ı	1 1	1 1	1 1	ı	1 1			ı	ı	I I	ı		1 1	ı
is changed	<i>1)</i>	Optional	Second E-Ma	ail Addres	ss														
		•	mbacg.com																
COMMITTEE'S WEB	PAGE AI	DDRESS (U	RL)																
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is only in	-,	1																	_
M	M / D	D / V	Y   Y   Y																
2. DATE 05	5	24	2024																
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3. FEC IDENTIFIC	CALION N	NUMBER		, 0008	39391	-													
4. IS THIS STATEM	MENT	NEW	(N) <b>O</b>	R	×	AM	IENDE	D (A)											
certify that I have e	examined	this Stateme	ent and to the	best of i	my kr	nowled	ge and	belief	it is	true,	, cor	rect	and	com	plete				
Type or Print Name	of Treasur	'Ar Mala C																	
Type of Trint Name (	oi ileasui	er <u>Mele, S</u> i	ieven, , ,																
Signature of Treasure	er <u>M</u> el	e, Steven, , ,							D	ate		05	/	2	24		202	24	Y
NOTE: Submission of	false, erro		omplete inform											oena	lties (	of 52	U.S.C	C. §30	0109.
Office		71111 011	THE IN INC.	ZI IIVIAI IOI			ner infor				. 10	<i>5</i> /110					M 1		
Use						Federal	Election 800-424	Commis					l		U F evised				I

Toll Free 800-424-9530

Local 202-694-1100

EC Form 1 (Revised 03/2022)	Page <b>2</b>
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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 t information below.)	he candidate
Name of Candidate Allred, Colin, , ,	
Candidate Party Affiliation  Office Sought: House  Senate President	State TX 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 Republican	tic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ted organization is a:
Corporation Corporation w/o Capital Stock Labor	Organization
Membership Organization Trade Association Cooper	_
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregat committee. (i.e., nonconnected committee)	ed 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 accounts (Hybrid F	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(j) 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
Committees Participating in Joint Fundraiser	
1C	

	FEC Form 1 (Revised 0)	2/2009)		Page <b>3</b>
٧	Vrite or Type Committee Name			
	Colin Allred for S	enate		
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Represen	ntative, or Leaders	ship PAC Sponsor
	Gallego Allred Victory	Fund		
	Mailing Address	611 Pennsylvania Ave SE		
		#143 		
		Washington	DC 20003	
		CITY ▲ STA	ATE A	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Rep	presentative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	y by name, address (phone number optional) and position of the	e person in possess	ion of committee
	Mele, Steve	n,,,		
	Mailing Address	611 Pennsylvania Ave SE		
		#143		
		Washington D	OC   20003	
		CITY ▲ STA	ATE 🛦	ZIP CODE ▲
	Title or Position ▼	611.7 =		
	Treasurer	Telephone number	202	552
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the comsistant treasurer).	nmittee; and the na	ame and address of
	Full Name Mele, Steve of Treasurer	n, , , , , , , , , , , , , , , , , , ,		
	Mailing Address	611 Pennsylvania Ave SE		
		#143		
		Washington	DC 20003	
		CITY ▲ STA	ATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephone number		552 - 0221

FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Full Name of	Lee, Lauren, Decot, ,		
Designated Agent	Lee, Lauren, Decot, ,		
Mailing Address	611 Pennsylvania Ave SE		
	#143 		
	Washington	DC 20	0003
Title or Position <b>▼</b>	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasur	er	e number 202	-   552   -   0221
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the cores or maintains funds.	mmittee deposits funds,	holds accounts, rents
Name of Bank, D	epository, etc.		
	Amalgamated Bank		
Mailing Address	1825 K St NW		
	Washington	DC 200	006
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Woodsboro Bank		
Mailing Address	PO Box 36		
	Woodsboro	MD 217	798
	CITY ▲	STATE ▲	ZIP CODE ▲

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h). <b>Joint Fundraisi</b>	ig raiticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Colin Allred Victory F	Organization, Affiliated Committee, Joint Furnd	ndraising Representativ	e, or Leadership PAC Spon
Mailing Address	611 Pennsylvania Ave SE		
	#143		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Sp
Connecte			ative Leadership PAC Sp
Connecte esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	by by name, address (phone number – optional)		
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h). <b>Joint Fundraisi</b>	ng Participant:		
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ame of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representative	e or Leadership PAC Spon
Allred Levin Victory I	_		
Mailing Address	600 Pennsylvania Ave SE		
	Unit 15180		
	Washington	DC DC	20003
B. Larra and C.	OITV	STATE ▲	ZIP CODE ▲
	CITY ▲  ed Organization	int Fundraising Representa	ative Leadership PAC Sp
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esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee X Jo  fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee X Jo  fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
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## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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PO Box 201 Salem	Affiliated Committee  CITY   Affiliated Committee  CITY   Affiliated Committee  dress (phone number	nittee X Jo	FEC FEC ndraising F	ID number ID num	C C C Ve, or L	eadership PAC Sp	
PO Box 201 Salem	13 CITY A Affiliated Comm	nittee X Jo	FEC FEC  ndraising F	BID number  Representati	C C Ve, or L	01970 ZIP CODE A	
PO Box 201 Salem	13 CITY A Affiliated Comm	nittee X Jo	ndraising F	Representati	ve, or L	01970 ZIP CODE A	
PO Box 201 Salem	13 CITY A Affiliated Comm	nittee X Jo	ndraising F	Representati	ve, or L	01970 ZIP CODE A	
PO Box 201 Salem	13 CITY A Affiliated Comm	nittee X Jo	oint Fundrais	MA STATE A		01970 ZIP CODE A	
PO Box 201 Salem	13 CITY A Affiliated Comm	nittee X Jo	oint Fundrais	MA STATE A		01970 ZIP CODE A	
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-	Affiliated Comm						
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ON ▼	CITY ▲			STATE ▲		ZIP CODE ▲	
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3.				FEC I	D number	С	
4.	1 1 1 1			FEC I	D number	С	
Vallejo Allre		_	liated Committee, Joint	Fundraising Re	epresentative	e, or Leadersnip PA	Spons
Mailing Ad	ldress	611 Pennsylvani	ia Ave SE				
		#143					
		Washington		, , , , I	DC	20003	-
Relationsh	ip:		CITY ▲		STATE A	ZIP CO	DE 🛦
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Booker Senate Majo	_		
Mailing Address	600 Pennsylvania Ave SE		
	#15180		
	Washington	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
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Connected O	rganization Affil	isted Committee Join	Fundraising Re	unresentative	or Leadership DAC Spons
PACT 2024					., or Leadership TAO opons
Address	600 Pennsylvani	a Ave SE			
	#15180				
	Washington	<u> </u>		DC	20003
ship:		CITY A		STATE A	ZIP CODE ▲
dress		CITY A		STATE A	ZIP CODE A
F	PACT 2024  ddress  chip:	PACT 2024  ddress  600 Pennsylvani  #15180  Washington  thip:  Connected Organization	ACT 2024  ddress  600 Pennsylvania Ave SE  #15180  Washington  thip:  CITY   Affiliated Committee	PACT 2024  ddress  600 Pennsylvania Ave SE  #15180  Washington  CITY   CITY	ddress  #15180  Washington  CITY   STATE   Connected Organization  Affiliated Committee  X Joint Fundraising Representation

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h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
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4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
2024 Green Senate			
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee X Joint Department of the Committee X Joint D		
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2024 S	enate Impact	_					
Mailir	ng Address	600 Pennsylvani	ia Ave SE				
		#15180					
		Washington		1	DC	20003	-
			CITY A		STATE A	ZIP C	ODE A
		Organization by name, address		Joint Fundraisin	g Representa	ative Leadersl	nip PAC Sp
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esignated Full Na Mailing	Connected  d Agent: Identify	by name, address	Affiliated Committee		g Representa	Leadersl Leadersl	

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1.		Participant:				
l				FEC I	D number	С
2				FEC I	D number	С
3				FEC I	D number	C
4				FEC I	D number	C
	-	Organization, Affili	ated Committee, Joint	Fundraising Re	presentative	e, or Leadership PAC Spons
Scriiii	(t) The Senate					
Ма	iling Address	611 Pennsylvania	Ave SE			
		Suite 143				
		Washington		1	DC	20003
Rel	ationship:		CITY A		STATE A	ZIP CODE ▲
esignat	ed Agent: Identity	by name, address	(phone number – optio	nal)		
Full N		by name, address	(phone number – optio	nal)		
Full N		by name, address	(phone number – optio	nal)		
Full N	Name	by name, address	(phone number – optio	nal)		
Full N	Name	by name, address	(phone number – optio	nal)		
Full N	Name		(phone number – optio	nal)	STATE A	ZIP CODE A