Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Lee-Neguse Victory Fund 910 17th ST NW Ste 925 ADDRESS (number and street) (Check if address is changed) Washington 20006 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS janica@pcmsllc.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00754457 FEC IDENTIFICATION NUMBER > 3. X 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. Kyriacopoulos, Janica, , , Type or Print Name of Treasurer Kyriacopoulos, Janica, , , [Electronically Filed] 80 2020 Signature of Treasurer Date 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

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		OMMITTEE	
Car	ndidate	e 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. (Complinformation below.)	ete the candidate
	ne of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Par	rty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, epublican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 seg committee. (i.e., nonconnected committee)	regated 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.)	
Joir	nt Fund	Iraising 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.	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.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	BARBARA LEE FOR CONGRESS FEC ID number C C0033	31769
	2.	JOE NEGUSE FOR CONGRESS FEC ID number C C0064	18253
	3.	FEC ID number	
	4.		

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Write or Type Committee Nar		<u> </u>
Lee-Neguse V	ictory Fund	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ership PAC Sponsor
NONE		
		<u>                                     </u>
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Id books and records.	entify by name, address (phone number optional) and position of the person in	possession of committee
Kyriacop	poulos, Janica, , ,	
	PO Box 65322	
Mailing Address		
	Washington DC 2003	5
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 202 –	628 - 1580
Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Kyriacop	oulos, Janica, , ,	
Mailing Address	PO Box 65322	
Maining Address		
	Washington   DC    20035	
	CITY STATE	ZIP CODE
Title or Position Treasurer		628   -   1580

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	II I (NEVISEU UZ/ZUUS)	raye 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
Banks or Other safety deposit be Name of Bank, I	Depositories: List all banks or other depositories in which the committee depositors or maintains funds.  Depository, etc.  Amalgamated Bank	s iurias, noias accounts, rents
maming / taur eee		
	Washington	20006
	Washington DC CITY STATE	20006 ZIP CODE
Name of Bank,	CITY STATE	
Name of Bank, I	CITY STATE	ZIP CODE
Name of Bank, Mailing Address	CITY STATE  Depository, etc.	ZIP CODE
	CITY STATE  Depository, etc.	ZIP CODE
	CITY STATE  Depository, etc.	ZIP CODE