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FEC FORM 1		STATEMEN ORGANIZ						Office	Use Onl	PAGE ^	1 / 19 —	٦
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example over the	e: If typing	, type	121	'E4M5		Use On	y		
		is changed)	over the	e intes.								
Rosen for Ne												
ADDRESS (number an	nd street)	PO Box 46110										
(Check if a is changed	ddress	1										
is changed	)	Las Vegas			1	NV		89114	1 1	_		
		CITY ▲				STAT	E ▲		ZIF	CODE		
COMMITTEE'S E-MA	IL ADDRES	S										
(Check if a is changed		rosen@mbacg.com										
	/	Optional Second E-Mail Add	dress									-
		smele@mbacg.com										
COMMITTEE'S WEB			,									
Check if a is changed		https://www.rosenfornevada.c	:om/									
		1										
												1
2. DATE 04	M / D I	2024										
3. FEC IDENTIFIC	ation NU		00606939									
4. IS THIS STATEM	1ENT	NEW (N) OR	×	AMEND	ED (A)							
I certify that I have e	xamined this	s Statement and to the best	of my know	vledge an	d belief it	t is true,	correc	and co	mplete.			_
Type or Print Name c	of Treasurer	Mele, Steven, , ,										
Signature of Treasure	r Mele,	Steven, , ,				Date	<sup>™</sup> 04		15		y y y 024	1

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 Use Only				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 06/2012)
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FEC Form 1 (Revised 03/2022)	Page <b>2</b>
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 information below.)	ne candidate
Name of Rosen, Jacky, , , Candidate	
Candidate Party Affiliation DEM Office Sought: House X Senate President	State NV District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:       (National, State or subordinate) committee of the       (Democrative committee)         (d)       This committee is a       (National, State or subordinate) committee of the       (Democrative committee)	c, , etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
Corporation Corporation w/o Capital Stock Labor C	Organization
Membership Organization Trade Association Coopera	ative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate 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 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 political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
 Committees Participating in Joint Fundraiser
 1.
 2.

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	FEC Form 1 (Revised 0	02/2009)																				Pa	ge 🕻	3		
۷	Vrite or Type Committee Name	1																								
	Rosen for Nevad	da																								
6.	Name of Any Connected O	rganization, Affiliated	Com	mitte	e, J	loin	t F	und	raisi	ng	Re	pre	ser	tat	ive,	, 01	Le	ad	ers	ship	р Р	AC	Sp	on	sor	
	Jacky Rosen Victory	Fund																								
	Mailing Address	611 Pennsylvania Ave	SE																							1
		Num 143																								
		Washington				I	I	I	1 1	I			[	DC			2	000	)3	I	1	-	.	1	I	I

Washington				
	CITY 🔺		STATE A	ZIP CODE
Relationship: Connected Organization	Affiliated Organization	X Joint Fundraisir	ng Representativ	e Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Mele, Stev	n, , ,	
Full Name		
Mailing Address	611 Pennsylvania Ave SE	
	Ste 143	
	Washington         DC         20003	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position ▼		
Treasurer	Telephone number     202     552     0221	

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

	Mele, Steven, , ,
of Treasurer	
Mailing Address	611 Pennsylvania Ave SE
	Ste 143
	Washington         DC         20003
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number     202     552     0221

FEC Form 1	(Revised 02/2009)
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Full Name of Designated Agent	Lee, Lauren, Decot, ,
Mailing Address	611 Pennsylvania Ave SE
	Ste 143
	Washington         DC         20003
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Assistant Treasur	er 

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.

Ľ	Amalgamated Bank		
Mailing Address	1825 K St NW		
	Washington	DC 20006	
	CITY A	STATE A	ZIP CODE
Name of Bank, Dep	pository, etc. Noodsboro Bank		
Mailing Address	5 N Main St		
		MD 21798	
	CITY 🔺	STATE A	ZIP CODE

5(g) or	(h). Joint Fundraising	g Participant:			
	1.			FEC ID number	С
	2.			FEC ID number	C
	3.			FEC ID number	C
	4.			FEC ID number	С
6. N	Name of Any Connected	Organization, Affiliated C	ommittee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
	Women Senators Mal	king History			
	Mailing Address	600 Pennsylvania Ave Sl			
		Ste 15180			
		Washington			20003
	Relationship:	(		STATE A	
	Connected	Organization Affiliate	d Committee 🗙 Join	t Fundraising Represent	ative
8. D	Designated Agent: Identify	by name, address (phone	e number – optional)		
	Mailing Address				
		1			-
	TITLE OR POSITION	Cľ	ΓΥ 🔺	STATE A	ZIP CODE 🔺
	1		<u> </u>	elephone Number	
	Banks or Other Depositor afety deposit boxes or ma		r depositories in which	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.				
	Mailing Address				
_		Cl	ΓΥ 🔺	STATE 🔺	ZIP CODE

1.					FEC ID number	С
2.					FEC ID number	С
3.					FEC ID number	С
4.					FEC ID number	С
6. <b>Name</b>	of Any Connected	Organization, <i>J</i>	Affiliated Committee, Jo	oint Fundrais	ing Representativ	ve, or Leadership PAC Sponsor
Ne	vada Senate Victor	y 2024				
	Mailing Address	611 Pennsyl	vania Ave SE			
		Suite 143				
		Washington				20003
	Relationship:		CITY 🔺		STATE 🔺	ZIP CODE
	Connected	Organization	Affiliated Committee	× Joint Fu	ndraising Represen	tative Leadership PAC Spon
-	nated Agent: Identify	by name, add	ress (phone number – o	ptional)		
Fu		by name, add	ress (phone number – o	ptional)		
Fu	ull Name	by name, add	ress (phone number – o	ptional)		
Fu	ull Name	by name, add	ress (phone number – o	ptional)		
Fu	ull Name		ress (phone number – o	ptional)		
Fu	ailing Address	· · · · · · · · · · · · · · · · · · · ·			I I I I I I I I I I I I I I I I I I I	
Fu M T  9. <b>Banks</b>	III Name				hone Number	
Fu M 9. <b>Banks</b> safety Name	ailing Address				hone Number	
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Fu M 9. <b>Banks</b> safety Name	Address TITLE OR POSITION TITLE OR POSITION TO THE Depositor Content Depositor Conte				hone Number	
Fu M 9. <b>Banks</b> safety Name	Address TITLE OR POSITION TITLE OR POSITION TO THE Depositor Content Depositor Conte				hone Number	

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5(g) or (h).	Joint Fundraising	Participant:		
1.	. [		FEC ID number	C
2			FEC ID number	С
3			FEC ID number	C
4	. [		FEC ID number	С
	-	Organization, Affiliated Committee, Joint Fundra	aising Representative	, or Leadership PAC Sponsor
BI	ue Senate Candidate	<pre>&gt; Fund                                      </pre>		
	Mailing Address	600 Pennsylvania Ave SE #15180		
		Washington		20003
	Relationship:	CITY A	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8. <b>Desi</b> ę	gnated Agent: Identify	by name, address (phone number - optional)		
	gnated Agent: Identify	by name, address (phone number - optional)		
F		by name, address (phone number - optional)		
F	Full Name	by name, address (phone number - optional)		
F	Full Name	by name, address (phone number - optional)		
F	Eull Name			
F	Full Name		I I I I I I I I I I I I I I I I I I I	
9. <b>Bank</b>	Full Name		lephone Number	
9. Bank safet Name	Full Name		lephone Number	
9. Bank safet Name	Full Name		lephone Number	
9. Bank safet Name	Full Name		lephone Number	
9. Bank safet Name	Full Name		lephone Number	

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5(g) or (h).	Joint Fundraising	Participant:			
1.	. [			FEC ID number	С
2				FEC ID number	С
3				FEC ID number	С
4				FEC ID number	C
6. <b>Nam</b>	e of Any Connected O	rganization, Affiliated Com	mittee, Joint Fundra	sing Representative	, or Leadership PAC Sponsor
	enate PA & NV				
	Mailing Address	600 Pennsylvania Ave SE #1	5180		
		Washington			20003
	Relationship:	CITY		STATE A	ZIP CODE
		y name, address (phone nu	mber – optional)		
	gnated Agent: Identify I Full Name	y name, address (phone nu	mber – optional)		
F		y name, address (phone nu	mber – optional)		
F	Full Name	y name, address (phone nu	mber – optional)		
F	Full Name	by name, address (phone nu	mber – optional)		
F	Full Name				
F	Tull Name			STATE	
F M - - 9. Bank	Full Name	CITY		ephone Number	I = I = I = I = I = I = I = I = I = I =
9. Bank safety Name	Full Name	CITY		ephone Number	
9. Bank safety Name	TITLE OR POSITION	CITY		ephone Number	
9. Bank safety Name	Full Name	CITY		ephone Number	
9. Bank safety Name	Full Name	CITY		ephone Number	

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
6. <b>Name</b>	of Any Connected C	Drganization, Affiliated Committee, Joint Fundra	ising Representative	. or Leadership PAC Sponsor
	nate IMPACT 2024		5 1	,
I	Mailing Address	600 Pennsylvania Ave SE #15180		
		Washington		20003
I	Relationship:	CITY 🔺	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint I	Fundraising Representa	tive Leadership PAC Sponsor
8. Desigr	nated Agent: Identity	by name, address (phone number - optional)		
Fu	II Name			
Ma	ailing Address			
т	ITLE OR POSITION		STATE A	ZIP CODE
			ephone Number	
9. Banks safety	deposit boxes or mair	<b>es:</b> List all banks or other depositories in which the ntains funds.	he committee deposits	funds, holds accounts, rents
	of Bank, itory, etc.	<u> </u>		
	Mailing Address			
	Mailing Address			
	Mailing Address			 

5(g) or	(h). Joint Fundraising	g Participant:	
	1.		FEC ID number
	2.		FEC ID number
	3.		FEC ID number
	4.		FEC ID number
- 6. N	Name of Any Connected	Organization. Affiliated Committee. Joint Fundra	aising Representative, or Leadership PAC Sponsor
		osen 2024 State Victory Fund	
	Mailing Address	401 2nd Ave S Ste 303	
		$\lfloor \ldots \ldots$	
		Seattle	WA 98104 –
	Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representative
8. C	Designated Agent: Identify	by name, address (phone number – optional)	
	Full Name		
	Mailing Address		
	TITLE OR POSITION		STATE A ZIP CODE A
	1		lephone Number
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	Banks or Other Depositor afety deposit boxes or ma		the committee deposits funds, holds accounts, rents
	Name of Bank, Depository, etc.		
	Mailing Address		
			STATE A ZIP CODE A

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5(g) or	(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
_	4.		FEC ID number	C
6. <b>N</b>	-	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Sponsor
	The Liftoff Fund			
	Mailing Address	600 Pennsylvania Ave SE #15180		
		Washington		20003
	Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
-		Organization Affiliated Committee X J by name, address (phone number – optional)	oint Fundraising Representa	tive Leadership PAC Sponsor
0. L	<b>Designated Agent:</b> Identity			
8. <b>E</b>				
0. L	Full Name			
0. L				
0. L	Full Name			
о. <b>L</b>	Full Name			
o. L	Full Name			
o. L	Full Name			<pre></pre>
9. E S N	Full Name		I I I I I I I I I I I I I I I I I I I	
9. E S N	Full Name          Mailing Address         TITLE OR POSITION            Banks or Other Depositor         safety deposit boxes or mail         Name of Bank,         Depository, etc.		I I I I I I I I I I I I I I I I I I I	
9. E S N	Full Name		I I I I I I I I I I I I I I I I I I I	
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5(g) or (h	). Joint Fundraising	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6. <b>Na</b>	me of Any Connected (	Drganization, Affiliated Committee, Joint Fur	draising Representative	e, or Leadership PAC Sponsor
L	314 Action Impact Sla	te		
L				
	Mailing Address	PO Box 14560		
		Washington		20044
	Relationship:	CITY A	STATE A	ZIP CODE
8. <b>De</b>		Organization Affiliated Committee X Jo by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sponsor
	Full Name			
	Mailing Address			
		1		
	TITLE OR POSITION		STATE A	ZIP CODE A
			Telephone Number	
saf Na	nks or Other Depositor ety deposit boxes or mai me of Bank, pository, etc.	ies: List all banks or other depositories in which ntains funds.	the committee deposit	s funds, holds accounts, rents
	Mailing Address			

Joint Fundraising	Participant:				
			FEC ID number	С	
			FEC ID number	С	
			FEC ID number	С	
			FEC ID number	С	
PA Victory Fund	Organization, Amiliated Commi	ttee, Joint Fundra	ising Representative	e, or Leadership PAC Spons	or
Mailing Address	611 Pennsylvania Ave SE				
	Suite 143				
	Washington			20003	
Relationship:	CITY		STATE 🔺	ZIP CODE	
Connected	Organization Affiliated Com	mittee 🗙 Joint I	Fundraising Representa	ative	onsor
ailing Address					
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		Tel	phone Number	-   -	I
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s or Other Depositor deposit boxes or mai	<b>ies:</b> List all banks or other depo ntains funds.	ositories in which th	ne committee deposit	s funds, holds accounts, rents	;
		ositories in which th	ne committee deposit	s funds, holds accounts, rents	;
deposit boxes or mai of Bank,		ositories in which th	ne committee deposit	s funds, holds accounts, rents	;
of Bank, sitory, etc.		<pre>&gt;sitories in which tl</pre>	ne committee deposit	s funds, holds accounts, rents	; 
of Bank, sitory, etc.		<pre>&gt;sitories in which tl</pre>	ne committee deposit	s funds, holds accounts, rents	
	of Any Connected O   of Any Connected O   PA Victory Fund   Mailing Address   Relationship:   Connected   nated Agent: Identify   ull Name   ull Name   uiling Address	Image: Solution of the second se	Image: Solution of the second se	Image: State A gent:   FEC ID number FILL 14 FEC ID number FILL 14	FEC ID number   C   Suite 143   Suite 144   Suite 144   Suite 144

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5(g) or (h).	Joint Fundraising	Participant:			
1.				FEC ID number	С
2.				FEC ID number	С
3.				FEC ID number	С
4.				FEC ID number	C
6. <b>Name</b>	of Any Connected C	Proanization. Affiliated Com	mittee. Joint Fundrai	sing Representative	, or Leadership PAC Sponsor
	NV WA WI Victory		,	5	,
	Mailing Address	600 Pennsylvania Ave SE #	15180		
		Washington			20003
	Relationship:	CIT	Y 🔺	STATE A	ZIP CODE
	Connected	Organization Affiliated C	ommittee X Joint F	undraising Representa	tive Leadership PAC Sponsor
8. Desig	nated Acent: Identify	by name, address (phone nu	umber entionel)		
	naleu Agent. Identity		inder – optional)		
		by name, address (phone n	imber – optional)		
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Fu	III Name			→ → → → → → → → → → → → → → → → → → →	· · · · · · · · · · · · · · · · · · ·
Fu Ma T	III Name		└	phone Number	
Fu Ma T  9. <b>Banks</b>	III Name	CITY	└	phone Number	L = L = L = L = L = L = L = L = L = L =
Fu Ma 9. <b>Banks</b> safety Name	ailing Address	CITY	└	phone Number	
Fu Ma 9. <b>Banks</b> safety Name	III Name	CITY	└	phone Number	
Fu Ma 9. <b>Banks</b> safety Name	III Name	CITY	└	phone Number	
Fu Ma 9. <b>Banks</b> safety Name	III Name	CITY	└	phone Number	

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

or(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fundra	ising Representativ	e, or Leadership PAC Sponsor
Justice 2024			
Mailing Address	600 Pennsylvania Ave SE		
	#15180		
	Washington	DC	20003
Relationship:		STATE	
	Organization Affiliated Committee Joint	Fundraising Represent	ative Leadership PAC Sponso
		Fundraising Represent	ative Leadership PAC Sponso
Designated Agent: Identify		Fundraising Represent	ative Leadership PAC Sponso
Designated Agent: Identify		Fundraising Represent	ative Leadership PAC Sponso
Designated Agent: Identify		Fundraising Represent	ative Leadership PAC Sponso
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	Fundraising Represent	ative
Designated Agent: Identify	by name, address (phone number – optional)		
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional)	I I I I I I I I I I I I I I I I I I I	
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional)	I I I I I I I I I I I I I I I I I I I	
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional)	I I I I I I I I I I I I I I I I I I I	
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main Name of Bank,	by name, address (phone number – optional)		
Designated Agent: Identify         Full Name         Mailing Address         TITLE OR POSITION         Banks or Other Deposito         safety deposit boxes or mail         Name of Bank,         Depository, etc.	by name, address (phone number – optional)		

CITY

STATE **A** 

ZIP CODE

L

5(g) or (h).	Joint Fundraising	Participant:		
1	1		FEC ID number	C
2	2.		FEC ID number	C
3	3.		FEC ID number	C
4	4		FEC ID number	C
6. Nam	ne of Any Connected C	Drganization, Affiliated Committee, Joint Fundrais	ing Representative	, or Leadership PAC Sponsor
	hree for the Majority			
	Mailing Address	600 Pennsylvania Ave SE #15180		
		Washington		20003
	Relationship:	CITY A	STATE A	ZIP CODE
		Organization Affiliated Committee X Joint Fu	Indraising Representa	tive Leadership PAC Sponsor
8. <b>Desi</b>	ignated Agent: Identify	by name, address (phone number - optional)		
	ignated Agent: Identify Full Name	by name, address (phone number – optional)		
I		by name, address (phone number – optional)		
I	Full Name	by name, address (phone number – optional)		
I	Full Name	by name, address (phone number - optional)		
I	Full Name			
I	Full Name		   STATE ▲ ohone Number	ZIP CODE ▲
9. <b>Ban</b> l	Full Name		bhone Number	
9. <b>Ban</b> l safet Nam	Full Name		bhone Number	
9. <b>Ban</b> l safet Nam	Full Name		bhone Number	
9. <b>Ban</b> l safet Nam	Full Name          Mailing Address         TITLE OR POSITION         ks or Other Depositori         ty deposit boxes or main         ne of Bank,         ository, etc.		bhone Number	
9. <b>Ban</b> l safet Nam	Full Name          Mailing Address         TITLE OR POSITION         ks or Other Depositori         ty deposit boxes or main         ne of Bank,         ository, etc.		bhone Number	

Banks or O safety depos Name of Ba Depository,	OR POSITION	es: List all bar				in whi		hone N		<pre></pre>	-	<pre></pre>		
TITLE Banks or C safety depose Name of Ba Depository,	OR POSITION	es: List all bar				in whi		hone N	umber	<pre></pre>	-			
TITLE Banks or C safety depose Name of Ba Depository,	OR POSITION	es: List all bar				in whi		hone N	umber		-			
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Full Nar						,								
Designated	Agent: Identify	bv name. addr	ess (pho	ne numb	er – or	tional)								
	Connected	Organization	Affilia	ted Comr	nittee	XJ	oint Fu	ndraising	Represent	ative	Lea	dership	PAC	Spor
Relatio	onship:				<u>   </u>				L STATE ▲		Z			
		Washington									0003			
Mailin	g Address													
		PO Box 6532	2											
Majority					,					,				
Name of A	ny Connected C	Organization. A	Affiliated	Commit	tee. Jo	int Fu	ndrais	ina Rec	resentativ	e. or Le	eadersh	nip PAC		nso
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									) number ) number					

5(g) or (h).	Joint Fundraising	g Participant:			
1.				FEC ID number	С
2.				FEC ID number	C
3.				FEC ID number	С
4.				FEC ID number	С
6. <b>Name</b>	e of Any Connected	Organization, Affiliated Commit	tee, Joint Fundra	sing Representative	e, or Leadership PAC Sponsor
	NV Victory Fund				
	Mailing Address	611 Pennsylvania Ave SE			
		Suite 143			
		Washington			20003
	Relationship:	CITY 🔺	·	STATE A	ZIP CODE
	Connected	Organization Affiliated Com	mittee 🗙 Joint F	undraising Representa	tive Leadership PAC Sponsor
-	nated Agent: Identify	by name, address (phone numb	er – optional)		
М	ailing Address				
٦	TITLE OR POSITION			STATE A	ZIP CODE
L			Tele	phone Number	
	s or Other Depositor deposit boxes or ma	ies: List all banks or other depo intains funds.	sitories in which th	e committee deposit	s funds, holds accounts, rents
	of Bank, sitory, etc.				
	Mailing Address				
(		CITY 🔺		STATE 🔺	ZIP CODE

5(g) oi	r(h). Joint Fundraisin	g Participant:			_		
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	2.			FEC II	0 number	С	
	3.			FEC II	0 number	C	
	4.				0 number	C	
6.	Name of Any Connected	Organization. Affi	liated Committee. Joint	Fundraising Reg	presentative.	or Leadership PAC	Sponsor
	2024 Green Senate						
	Mailing Address	120 Maryland A	ve NE				
		Washington			DC	20002	
	Relationship:		CITY A		STATE A	ZIP COD	E 🔺
	Connected	I Organization	Affiliated Committee	× Joint Fundraising	g Representati	ve	AC Sponsor
8.	<b>Designated Agent:</b> Identify	by name, addres	s (phone number – optic	nal)			
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		1					
	Mailing Address						
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