FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Bergmann for Congress Campaign 7857 Capital Peak LN East ADDRESS (number and street) #304 (Check if address is changed) Memphis 38125 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address caroleavan@outlook.com is changed) Optional Second E-Mail Address charlotte@BergmannforCongress.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://BergmannforCongress.com (Check if address is changed) DATE 2025 C00693143 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. Type or Print Name of Treasurer Van Vossen, Carol, , 09 17 2025 Signature of Treasurer Van Vossen, Carol, , , Date 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 calinformation below.)	ndidate			
	Name of Candidate Bergmann, Charlotte, , ,				
	Candidate Party Affiliation REP Sought: X House Senate President	State TN District 09			
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name of Candidate				
	arty 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	ganization is a:			
	Corporation Corporation w/o Capital Stock Labor Organ	ization			
	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 segregated fur committee. (i.e., nonconnected committee)	nd 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 monotonittees/organizations, at least one of which is an authorized committee of a federal candidate.	re political			
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mocommittees/organizations, none of which is an authorized committee of a federal candidate.	re political			
	Committees Participating in Joint Fundraiser				
	1				

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٧	Vrite or Type Committee Name				
	Bergmann for Co	ongress Campaign			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	BERGMANN FOR C	ONGRESS			
	Mailing Address	7857 Capital Peak Lane East			
		MEMPHIS	TN	38125	
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Relationship: Connected	Organization X Affiliated Organization	Joint Fundraising Representative	Leadership PAC Sponso	
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Bergmann Full Name	, Charlotte, , ,			
	Mailing Address	7857 Capital Peak LN East #304			
		#304			
		Memphis		38125	
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼				
	Custodian of Records		Telephone number 901	679 8990	
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).				
	Full Name Van Vosse of Treasurer	en, Carol, , ,			
	Mailing Address	5140 Oak Meadow Ave			
		Memphis	TN L	38134	
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼				
	Secretary Treasurer		Telephone number 901	603 7787	

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Full Name of Designated		<u> </u>				
Agent						
Mailing Address						
Title or Position	CITY ▲	STATE ▲ ZIP CODE ▲				
	Telephor	ne number				
Banks or Other safety deposit bo	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, [Name of Bank, Depository, etc.					
	Renasant Bank					
Mailing Address	6671 Summer Ave					
	Suite 101					
	Bartlett	TN 38134 - -				
	CITY A	STATE ▲ ZIP CODE ▲				
Name of Bank, Depository, etc.						
Mailing Address						
	CITY ▲	STATE ▲ ZIP CODE ▲				