FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) DNC Services Corp / Democratic National Committee 430 South Capitol Street SE ADDRESS (number and street) (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address fec@dnc.org is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00010603 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 McGregor, Virginia,, 11 25 2025 Signature of Treasurer McGregor, Virginia, , , 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

FEC Form 1 (Revised 03/2022)	age 2
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 candid information below.)	date
Name of Candidate	
Party Affiliation Sought: House Senate President	ate
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	rict
Name of Candidate	
Party Committee: (d) This committee is a NAT (National, State or subordinate) committee of the DEM (Democratic, Republican, etc.) Party Committee:	arty
Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	ization is a:
Corporation Corporation w/o Capital Stock Labor Organizat	tion
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 fund committee. (i.e., nonconnected committee)	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	political
Committees Participating in Joint Fundraiser	
1	=

Treasurer

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l	FFC Form 1 (Posicod 0	0/0000)		Down 2
V	FEC Form 1 (Revised 0 Write or Type Committee Name	2/2009)		Page 3
		orp / Democratic National Comr	nittee	
6.		rganization, Affiliated Committee, Joint Fundraising		ship PAC Sponsor
	Democratic Grassroo			· · · · · · · · · · · · · · · · · · ·
	Mailing Address	430 South Capitol Street SE		
		Washington	DC 20003	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fund	draising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identibooks and records. Vogel, Tary	ify by name, address (phone number optional) and pos	sition of the person in possess	sion of committee
	Full Name	.,,, 		
	Mailing Address	430 South Capitol Street SE		
		Washington	DC 20003	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Custodian of Records	Telephor	ne number 202 - L	863 - 8000
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer assistant treasurer).	of the committee; and the n	ame and address of
	Full Name McGregor, of Treasurer	Virginia, , ,		
	Mailing Address	430 South Capitol Street SE		
		Washington	DC 20003	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			

202

Telephone number

863

8000

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated	Vogel, Taryn, , ,		
Agent Mailing Address	430 South Capitol Street SE		
	Washington	DC	20003
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasu	rer Telephone num	nber 20	02 863 8000
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committeexes or maintains funds.	ee deposits fo	unds, holds accounts, rents
Name of Bank, [Depository, etc.		
	Amalgamated Bank		
Mailing Address	275 Seventh St SE		
	New York	NY	10001
	CITY A	STATE ▲	ZIP CODE ▲
Name of Bank, [Depository, etc.		
	Citizens Trust Bank		
Mailing Address	230 Peachtree St		
	Ste 2700		
	Atlanta	GA	30303
	CITY ▲	STATE ▲	ZIP CODE ▲

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

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h). Joint Fundraisir	g . a. a. o.paa.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spon
Harris Victory Fund			
Mailing Address	430 South Capitol Street SE		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	by name, address (phone number – optional)	sint Fundraising Represent	Ative Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail ame of Bank, epository, etc. Bank Center Depository, etc.	ries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

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

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Page	of ⁹	

h). Joint Fundrais	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
		- I - I - I - I - I - I - I - I - I - I	and and and the RAG Green
-	d Organization, Affiliated Committee, Joint Fues Corporation - Federal	ndraising Representativ	e, or Leadership PAC Spon
Mailing Address	430 South Capitol Street SE		
	Washington	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee	loint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
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esignated Agent: Ident	fy by name, address (phone number – optional		ative Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional		
Full Name Mailing Address	fy by name, address (phone number – optional CITY CITY ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank,	fy by name, address (phone number – optional CITY CITY ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional CITY CITY ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional CITY CITY ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent

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

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connector	l Organization, Affiliated Committee, Joint Fu	ndraining Poprocentativ	o or Londorphin BAC Spon
-	tional Convention Committee	Huraising Representativ	e, or Leadership TAC Spon
Mailing Address	430 South Capitol Street SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee July July Strategy July	oint Fundraising Represent	ative Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whitaintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whitaintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whitaintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whitaintains funds.	STATE A Telephone Number	ZIP CODE A

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

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	ng Participant:				
1.			FEC II	number	C
2			FEC II	number	C
3.			FEC II) number	C
4.			FEC II	number	C
Name of Any Connected , Harris Action Fund	Organization, Affilia	ted Committee, Joint I	Fundraising Rep	resentative	e, or Leadership PAC Sponso
Harris Action Fund					
Mailing Address	430 South Capitol	Street SE			1 1 1 1 1 1 1 1 1 1
	Washington		1	DC	20003
Relationship:		CITY A		STATE A	ZIP CODE ▲
	d Organization A	ffiliated Committee	Joint Fundraising		ative Leadership PAC Spon
Full Name					
Mailing Address					
TITLE OR POSITION	•	CITY A		STATE A	ZIP CODE ▲
TITLE OR POSITION	▼	CITY A	Telephone N		ZIP CODE ▲

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

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1	1		
2.		FEC ID number	С
		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representativ	e, or Leadership PAC Spons
2028 Democratic Nat	ional Convention Committee		
Mailing Address	430 South Capitol Street SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connector	d Organization X Affiliated Committee Joint	t Fundraising Represent	ative Leadership PAC Spo
	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Designated Agent: Identify	by name, address (phone number – optional)		
Designated Agent: Identify Full Name	by name, address (phone number – optional)		
Designated Agent: Identify Full Name	by name, address (phone number – optional)		
Designated Agent: Identify Full Name Mailing Address	CITY A	STATE A	ZIP CODE A
Designated Agent: Identify Full Name	CITY A	STATE A	ZIP CODE A