

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

## Tie Breaker Candidate Fund

ADDRESS (number and street) 600 Pennsylvania Ave SE # 15180

(Check if address is changed)

Washington

CITY ▲

DC

STATE ▲

20003

ZIP CODE ▲

### COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

fec@capcompliance.com

Optional Second E-Mail Address

### COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

09 / 03 / 2020

3. FEC IDENTIFICATION NUMBER ►

C C00757328

4. 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 Zamore, Judith, , ,

Signature of Treasurer

Zamore, Judith, , ,

[Electronically Filed]

Date

09 / 03 / 2020

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 Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

5. 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 candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State   
 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  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g)  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.
- (h)  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. JON HOADLEY FOR CONGRESS FEC ID number C C00701599
2. ALYSE FOR ALASKA FEC ID number C C00665711
3. DEPASQUALE FOR PA 10 FEC ID number C C00710533
4. KATHLEEN WILLIAMS FOR MONTANA FEC ID number C C00701748

Write or Type Committee Name

# Tie Breaker Candidate Fund

**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  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.

Full Name Zamore, Judith, , ,

Mailing Address 600 Pennsylvania Ave SE #15180

Washington

DC

20003

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 202 - 544 - 6960

**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 of Treasurer Zamore, Judith, , ,

Mailing Address 600 Pennsylvania Ave SE #15180

Washington

DC

20003

Title or Position Treasurer

CITY

STATE

ZIP CODE

Telephone number 202 - 544 - 6960

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for Telephone number]

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.

Amalgamated Bank

[Empty grid for Name of Bank, Depository, etc. line 1]

Mailing Address

1825 K St NW

[Empty grid for Mailing Address line 2]

Washington DC 20006

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc. line 1]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

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

5(g) or (h).

Joint Fundraising Participant:

- 1. MARGARET GOOD FOR CONGRESS
- 2. DEBBIE FOR CONGRESS
- 3. CARTWRIGHT FOR CONGRESS
- 4. BLUE MOMENTUM PAC

|               |           |
|---------------|-----------|
| FEC ID number | C00713222 |
| FEC ID number | C00652065 |
| FEC ID number | C00509968 |
| FEC ID number | C00589309 |

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Empty text input fields for organization name.

Mailing Address

Empty text input fields for mailing address.

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

- Connected Organization
- Affiliated Committee
- Joint Fundraising Representative
- Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Empty text input field for full name.

Mailing Address

Empty text input fields for mailing address.

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Empty text input field for title or position.

Telephone Number

Empty text input fields for telephone number.

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.

Empty text input field for bank name.

Mailing Address

Empty text input fields for mailing address.

CITY ▲

STATE ▲

ZIP CODE ▲