Image# 202202109491617691					
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4	
	(0) 1 1			ffice Use Only	
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
Beasley Victory F	Fund				
	611 Pennsylvania Avenue SE				
ADDRESS (number and street)	Suite 143				
is changed)	Washington)03	
			STATE ▲		
COMMITTEE'S E-MAIL ADDRE	SS				
(Check if address is changed)	beasley@mbacg.com				
	Optional Second E-Mail Ad	dress			
COMMITTEE'S WEB PAGE AD (Check if address is changed)					
2. DATE 02 / 10					
3. FEC IDENTIFICATION N	UMBER ► C C	00804872			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
			·		
I certify that I have examined the	his Statement and to the best	of my knowledge and belief it	is true, correct and	i complete.	
Type or Print Name of Treasure	Lee, Lauren, Decot, ,				
Signature of Treasurer	Lauren, Decot, ,	[Electronically Filed]	Date 02	10 / Y Y Y Y 2022	
NOTE: Submission of false, erron		may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.	
Office Use Only		For further information c Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)	

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FI	EC For	m 1 (Revised 02/2009)	Page 2
TYPE	OF C	DMMITTEE	
Cand	lidate	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. (Compleinformation below.)	te the candidate
Name Candio			
Candio Party	date Affiliatio	on Office Sought: House Senate President	State
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candio			
Party	/ Com	mittee:	
(d)			emocratic, publican, etc.) Party
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is
		Corporation Corporation w/o Capital Stock	abor 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 segre committee. (i.e., nonconnected committee)	egated 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.)	
Joint	Fund	raising 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 or committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	nittees Participating in Joint Fundraiser	
	1.	CHERI BEASLEY FOR NORTH CAROLINA FEC ID number C C0077	7904
	2.	NORTH CAROLINA DEMOCRATIC PARTY - FEDERAL	688
	3.	FEC ID number	
	4.	FEC ID number	

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Write or Type Committee Name

Beasley Victory Fund

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

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fur	ndraising 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.

Lee, Laure	n, Decot, ,
Full Name	
Mailing Address	611 Pennsylvania Avenue SE
	Suite 143
	Washington DC 20003
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number

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 Le	e, Lauren, Decot, ,
Mailing Address	611 Pennsylvania Avenue SE
	Suite 143
	Washington DC 20003 -
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent	Brengarth, Megan, , ,	
Mailing Address	611 Pennsylvania Avenue SE	
	Suite 143	
	Washington	
	CITY STATE ZIP CODE	
Title or Position	Jrer	

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		
Mailing Address	1825 K Street NW		
	Washington	DC 20006	
	CITY	STATE ZIP CODE	
Name of Bank, De	epository, etc.		
Mailing Address			
	CITY	STATE ZIP CODE	