Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Secure our Senate 2020 918 Pennsylvania Ave SE ADDRESS (number and street) (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS zamore@capcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00746503 FEC IDENTIFICATION NUMBER > 3. 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. Zamore, Judith, , , Type or Print Name of Treasurer Zamore, Judith,,, [Electronically Filed] 05 18 2020 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Car	ndidate	Committee:	
(a)	Ш	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. (Cominformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)			Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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.	•
<b>(f</b> )			areasted fund or north
(f)	Ш	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated lund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt 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.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	CAL FOR NC	709410
	2.	SARA GIDEON FOR MAINE FEC ID number C C007	09899
	3.		96153
	4.	WARNOCK FOR GEORGIA	36876

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FEC Form 1 (Revised 0		Page <b>3</b>
Write or Type Committee Name		
Secure our Sen	ate 2020	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representati	ve Leadership PAC Sponsor
<ol> <li>Custodian of Records: Iden books and records.</li> </ol>	tify by name, address (phone number optional) and position of the per	rson in possession of committee
Zamore, Ju	udith, , ,	
	918 Pennsylvania Ave SE	
Mailing Address		
	Washington DC	,20003
	vasilington	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	02
3. <b>Treasurer</b> : List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; a ssistant treasurer).	and the name and address of
Full Name Zamore, Ju	dith, , ,	
Mailing Address	918 Pennsylvania Ave SE	
Ç		
	Washington	20003   _
	CITY STATE	ZIP CODE
Title or Position Treasurer		2 544 - 6960

	<b>n 1</b> (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
T111 D 111	CITY STATE	ZIP CODE
Title or Position		
6	Depositories: List all banks or other depositories in which the committee deposits funds, holds	
Name of Bank, I	Depository, etc.  Amalgamated Bank  1825 K St NW	<u> </u>
	Depository, etc.  Amalgamated Bank	
Name of Bank, I	Depository, etc.  Amalgamated Bank	
Name of Bank, I	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  DC 20006	ZIP CODE
Name of Bank, I	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE	ZIP CODE
Name of Bank, I	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE	
Name of Bank, I	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Depository, etc.	
Name of Bank, I	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Depository, etc.	
Name of Bank, I	Depository, etc.  Amalgamated Bank  1825 K St NW  Washington  CITY  STATE  Depository, etc.	

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

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2	THERESA GRE	ENFIELD FOR IOWA	FEC	ID number	C C00708164
A.   FEC ID number   C	2		, , ,   FEC	ID number	C
A. FEC ID number C  ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PA  Mailing Address  Relationship: CITY ▲ STATE ▲ ZIP CO  Connected Organization			I FEC	ID number	С
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PA  Mailing Address  Relationship:  CITY ▲ STATE ▲ ZIP CO  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership  Besignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP COD  Telephone Number  Telephone Number  Telephone Number  Telephone Number  Telephone Number					
Mailing Address  Relationship:  CITY ▲  STATE ▲  ZIP CO  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership  esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP COD  Telephone Number  Title OR Position Number  Title OR Position Number  Title OR Position Number  Telephone Number  Telephone Number	4				O
Relationship: CITY ▲ STATE ▲ ZIP CO  Connected Organization	ame of Any Connected C	Organization, Affiliated Committ	ee, Joint Fundraising Re	epresentative	e, or Leadership PAC Spon
Relationship: CITY ▲ STATE ▲ ZIP CO  Connected Organization					
Relationship: CITY ▲ STATE ▲ ZIP CO  Connected Organization					
Connected Organization	Mailing Address				
Connected Organization					
Connected Organization					
Pesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP COD  Telephone Number	Relationship:	CITY A		STATE A	ZIP CODE ▲
Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP COD  Telephone Number  Telephone Number  Telephositories: List all banks or other depositories in which the committee deposits funds, holds accounted the depository, etc.	Connected	Organization Affiliated Comm	nittee Joint Fundraisi	ng Representa	ative Leadership PAC S
Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP COD  Telephone Number  Telephone Number  anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accountety deposit boxes or maintains funds.  ame of Bank, epository, etc.					
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP COD  Telephone Number		by name, address (phone number	er – optional)		
TITLE OR POSITION   CITY   Telephone Number		by name, address (phone number	er – optional)		
TITLE OR POSITION   CITY   Telephone Number	Full Name	by name, address (phone number	er – optional)		
TITLE OR POSITION   Telephone Number	Full Name	by name, address (phone number	er — optional)		
Telephone Number	Full Name				
affety deposit boxes or maintains funds.  ame of Bank,  epository, etc.	Full Name	CITY A			ZIP CODE A
Mailing Address	Full Name	CITY A		STATE A	
	Full Name  Mailing Address  TITLE OR POSITION  Tanks or Other Depositoring the deposit boxes or main the same of Bank,	CITY A  es: List all banks or other depos	Telephone	STATE A	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Tanks or Other Depositoring the deposit boxes or main the depository, etc.	CITY A  es: List all banks or other depos	Telephone	STATE A	ZIP CODE A
1	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositoricatety deposit boxes or main ame of Bank, epository, etc.	CITY A  es: List all banks or other depos	Telephone	STATE A	ZIP CODE A