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. Michelle Steel for Congress 9070 Irvine Center Drive ADDRESS (number and street) Suite 150 (Check if address is changed) Irvine 92618 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address info@campaign-compliance.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.michellesteelforcongress.com (Check if address is changed) DATE 2024 C00704981 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 Slater, Jen, , Date 10 13 2024 Signature of Treasurer Slater, Jen, , , 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

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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 information below.)	he candidate
Name of Candidate Steel, Michelle, , ,	
Candidate Party Affiliation REP Office Sought: House Senate President	State CA District 45
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District 10
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State (Democration or subordinate) committee of the Republican	ic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
Corporation Corporation w/o Capital Stock Labor C	Organization
Membership Organization Trade Association Cooper	_
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed 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.)	
(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 P	AC).
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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(j) 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.	or more political
Committees Participating in Joint Fundraiser	
1	

I	FEC Form 1 (Revised 0	2/2009)		Page 3
V	Vrite or Type Committee Name	- Consumo		
_	Michelle Steel fo			
6.	-	ganization, Affiliated Committee, Joint Fundraising Represe	entative, or Leader	ship PAC Sponsor
	Steel Victory Fund			
	Mailing Address	9070 Irvine Center Drive #150		
		Irvine	CA 92618	
		CITY ▲ ST	TATE A	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Re	epresentative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of th	ne person in posses	sion of committee
	Slater, Jen, Full Name	,, 		
	Mailing Address	9070 Irvine Center Drive Suite 150		
		Irvine	CA 92618	
		CITY ▲ ST	TATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephone number	er 949 – [858 7448
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the consistant treasurer).	ommittee; and the r	name and address of
	Full Name Slater, Jen, of Treasurer	,, 		
	Mailing Address	9070 Irvine Center Drive Suite 150		
		Irvine	CA 92618	
		CITY ▲ ST.	TATE ▲	ZIP CODE ▲
	Title or Position ▼			
		Telephone number	er 949 – [858 7448

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position	,	
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the committee deposits funds, holdes or maintains funds.	ds accounts, rents
Name of Bank, D	epository, etc.	
Mailing Address	Bank of America	
Maining / tadiooc	1	
	Irvine	
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
	Middletown Valley Bank	
Mailing Address	24 W Main Street	
	Middletown 21769	
	CITY ▲ STATE ▲	ZIP CODE ▲

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

(h). Joint Fundraisin		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
AMERICAN DREAM	VICTORY FUND		
Mailing Address	9070 IRVINE CENTER DRIVE		
Mailing Address	SUITE 150		
	IRVINE	CA	92618
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC S
	d Organization Affiliated Committee X Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
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esignated Agent: Identify	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	ries: List all banks or other depositories in which sintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	Iraising Representative	e. or Leadership PAC Spons
PROTECT THE HO			· · ·
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
		nt Fundraising Representa	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ing Participant:		
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-	d Organization, Affiliated Committee, Joint Fund USE CALIFORNIA 2024	Liver in the second control of the second co	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Ident	ify by name, address (phone number - optional)		
Full Name	ify by name, address (phone number – optional)		
	ify by name, address (phone number – optional)		
Full Name	ify by name, address (phone number – optional)		
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Full Name L L L L L L L L L L L L L L L L L L L	CITY A	STATE A Telephone Number	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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lame of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
GOP WINNING WO	MEN 2024		
Mailing Address	228 S WASHINGTON ST		
	STE 115		
	ALEXANDRIA	, , , , VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identif			Leadership PAC Spo
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Mailing Address	228 S Washington St #115		
	Alexandria	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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EMMER MAJORITY	BUILDERS		
Martin Addison	824 S. MILLEDGE AVE. STE. 101		
Mailing Address			
	ATUENO		00005
	ATHENS	L GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
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	ng Participant:		
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SCALISE LEADERS	Organization, Affiliated Committee, Joint Fullip FUND 2024	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	320 1ST ST SE		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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Jame of Any Connected	I Organization, Affiliated Committee, Joint Fun	draising Representative	e or Leadership PAC Spons
AMERICAN BATTLE			, , , , , , , , , , , , , , , , , , ,
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
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Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A
Connected Resignated Agent: Identification of Position	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A

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or(h). Joint Fundrais	sing Participant:		
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GROW THE MAJO	ed Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
GROW THE WASC			
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
Connec	ted Organization Affiliated Committee X Jo	int Fundraising Representa	ative Leadership PAC Sponso
Designated Agent: Iden	tify by name, address (phone number – optional)		
Mailing Address	1		
Ü			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
IIILE ON FOSITIO		Telephone Number	
Banks or Other Depos safety deposit boxes or Name of Bank, Depository, etc. Mailing Address		th the committee deposit	s funds, holds accounts, rents
			712 002
	CITY ▲	STATE ▲	ZIP CODE ▲

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	g Participant:			
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Name of Any Connected	Organization, Affiliated Committee, Jo	oint Fundraising Repr	esentative,	or Leadership PAC Sponsor
SCOTT FRANKLIN V				
Mailing Address	P.O. BOX 2811			
ag / taa.eee				
	LAKELAND			, 33806
			FL L	
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
Full Name	y by name, address (phone number – o			
Mailing Address	1			
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	_ CITY ▲	S [.]	ΓΑΤΕ ▲	ZIP CODE ▲
TITLE OR POSITION	•			

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Mailing Address	9460 TEGNER	R ROAD	1 1 1 1 1 1 1		
	HILMAR			CA	95324 ZIP CODE ▲
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l Organization, Affiliated Committee, Joint Fu	ndraising Representative	, or Leadership PAC Spons
DRY FUND 2024		
. 228 S WASHINGTON ST		
STE. 115		
ALEXANDRIA	VA	22314
CITY ▲	STATE ▲	ZIP CODE ▲
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CITY ▲	STATE ▲	ZIP CODE ▲
CITY ▲	STATE Telephone Number	ZIP CODE ▲
	228 S WASHINGTON ST. STE. 115 ALEXANDRIA CITY and Organization Affiliated Committee X J	228 S WASHINGTON ST. STE. 115 ALEXANDRIA CITY STATE