STATEMENT OF

PAGE 1 / 17 =

FEC FORM 1		_	RGA			-								Office	Use C	Only			
1. NAME OF COMMITTEE (ir	n full)		(Check if n			nple:If t		type)	1	2F	E41							
Elaine for C	•				over														
ADDRESS (number a	nd street)	PO Box	66191																
(Check if a is changed																	1 1		
	,	Virginia								L	VA 		2	3466					
		С	ITY ▲							S	TATE	A			Z	ZIP C	ODE	A	
COMMITTEE'S E-MA	AIL ADDRES																		
		jay@b	luewavep	oolitics.c	om														
		Optional	Second E	-Mail Add	dress														
COMMITTEE'S WEB (Check if a is changed)	address	,	RL)	om 															
2. DATE 1		D / Y	2020]															
3. FEC IDENTIFIC	CATION NU	IMBER)	•	C co	00664375		-	Ш											
4. IS THIS STATEM	MENT	NEW	/ (N)	OR	×	AM	IENDE	ED (A	A)										
I certify that I have e	examined th	is Stateme	ent and to	the best	of my kı	nowled	ge and	l beli	ef it	is tr	ue,	corre	ct ar	nd co	mplet	e.			
Type or Print Name	of Treasurer	Petterso	on, Jay, , ,																
Signature of Treasure	er <i>Petters</i>	son, Jay, , ,				Electro	ically	Filed)	1	Dat	e 		10	/	15	/		020	Y
NOTE: Submission of			complete inf											e per	alties	of 2	U.S.C	C. §4	37g.
Office Use Only						For furti Federal Toll Free Local 20	Election 800-42	Com 24-953	missi		t:				EC I				

	-	(7)	5 0
		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • 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. (Corinformation below.)	nplete the candidate
Nam Cand	e of didate	Luria, Elaine, , ,	
	didate / Affiliati	on DEM Office Sought: X House Senate President	State VA District 02
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number	
	3.		
	4.		

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam		T ago o
Elaine for Cong		
_	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersl	hip PAC Sponsor
Luria Victory Fund		
Mailing Address	PO Box 66191	
	Virginia Beach VA 23466	. -
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee X Joint Fundraising Representative Lea	adership PAC Sponso
books and records. Petterson Full Name Mailing Address	Jay, , , 401 2nd Avenue South Suite 303 Seattle WA 98104	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 206 –	682 7328
3. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nar assistant treasurer).	ne and address of
Full Name Petterson,	, Jay, , ,	
of Treasurer	401 2nd Avenue South	
Mailing Address		
	Suite 303	
	Seattle WA 98104	
Title or Position		ZIP CODE
Treasurer	Telephone number	682 7328

FEC Form 1 (R	Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
		, Holus accounts, Terits
safety deposit boxes on Name of Bank, Depos		
safety deposit boxes o Name of Bank, Depos	nk of America	
safety deposit boxes on Name of Bank, Depos	nk of America 4616 Virginia Beach Blvd	462
safety deposit boxes on Name of Bank, Depos	nk of America 4616 Virginia Beach Blvd	2462 ZIP CODE
safety deposit boxes on Name of Bank, Depos	or maintains funds. ink of America 4616 Virginia Beach Blvd Virginia Beach CITY STATE	
Name of Bank, Depos Mailing Address Name of Bank, Depos	or maintains funds. ink of America 4616 Virginia Beach Blvd Virginia Beach CITY STATE	
Safety deposit boxes of Name of Bank, Deposition Mailing Address Name of Bank, Deposition Name of Bank, Deposition	r maintains funds. itory, etc. nk of America 4616 Virginia Beach Blvd Virginia Beach CITY STATE STATE 900 N East St	

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

5(g) or (h). Joint Fundraising	Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
JEM FUND			
	_		
Mailing Address	910 17TH ST NW STE 925		1 1 1 1 1 1 1 1 1 1 1
	WASHINGTON	DC	20006
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint Fo	undraising Representa	ative Leadership PAC Sponsor
8. Designated Agent: Identify I	by name, address (phone number – optional)		
Mailing Address			
ŭ			
	I		
TITLE OF POSITION	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION •	CITY A		
	CITY Tele es: List all banks or other depositories in which the	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page _6_ **of** _17__

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.	 	FEC ID number	
	2.		FEC ID number C	
	3.		FEC ID number	
	4.		FEC ID number	
6.		Organization, Affiliated Committee, Joint Fund	aising Representative, or L	eadership PAC Sponsor
	PROBLEM SOLVI	ER DEMOCRATS		1
	Mailing Address	918 PENNSYLVANIA AVE SE		
		1		
		WASHINGTON	DC 2	0003
	Relationship:	CITY A	STATE ▲	ZIP CODE A
	Connected	Affiliated Committee X Joint	Fundraising Representative	Leadership PAC Sponsor
	•			
8.	Designated Agent: Identify	by name, address (phone number – optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE ▲	
8.	Full Name	CITY A		
	Full Name _ _ _ Mailing Address TITLE OR POSITION	CITY A Te	STATE ▲	ZIP CODE ▲
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY A ries: List all banks or other depositories in which intains funds.	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A ries: List all banks or other depositories in which intains funds.	STATE STATE elephone Number the committee deposits funds	ZIP CODE A
	Full Name	CITY A ries: List all banks or other depositories in which intains funds.	STATE STATE elephone Number the committee deposits funds	ZIP CODE A
	Full Name	CITY A ries: List all banks or other depositories in which intains funds.	STATE STATE elephone Number the committee deposits funds	ZIP CODE A

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

5(g) or (h)	. Joint Fundraising	Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	GO FOR BROKE F	PO BOX 15320 WASHINGTON	DC	20003
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	signated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
	Full Name			
	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name	CITY A	STATE A	
9. Ban safe	Full Name	CITY CITY Tele es: List all banks or other depositories in which the	phone Number	ZIP CODE A
9. Ban safe	Full Name Mailing Address TITLE OR POSITION To the position of Bank, pository, etc.	CITY CITY Tele es: List all banks or other depositories in which the	phone Number	ZIP CODE A

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

h). Joint Fundraisi n		FEC ID number	
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
VIRGINIA HOUSI	E VICTORY FUND		
Mailing Address	430 South Capitol Street SE		
	2nd Floor		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	5 2		
Connected	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC S
Connected		t Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee Joint by by name, address (phone number – optional)		
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee Joint Joint by by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or marketers.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Anks or Other Deposito	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail ame of Bank,	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depositors, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	g Participant:			
1			FEC ID number	C
2			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
			draising Representativ	ve, or Leadership PAC Spor
SERVICE FIRST	WOMEN'S VICTOR	Y FUND		
	ı PO BOX 9			
Mailing Address				
	LEXINGTON		L KY	40588
Relationship:	0	CITY A	STATE A	ZIP CODE A
0				
			int Fundraising Represen	tative Leadership PAC S
esignated Agent: Identif	d Organization Affiliated / by name, address (phone		int Fundraising Represen	tative Leadership PAC S
esignated Agent: Identif			int Fundraising Represen	tative Leadership PAC S
esignated Agent: Identif			int Fundraising Represen	tative Leadership PAC S
esignated Agent: Identif	by name, address (phone	number – optional)		
esignated Agent: Identif	by name, address (phone	number – optional)		
esignated Agent: Identif Full Name Mailing Address	by name, address (phone	number – optional)		
Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other	number – optional)	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or ma	ries: List all banks or other	number – optional)	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or ma	ries: List all banks or other	number – optional)	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor detay deposit boxes or material depository, etc	ries: List all banks or other	number – optional)	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	ries: List all banks or other	number – optional)	STATE A Telephone Number	ZIP CODE A

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

h). Joint Fundraisin ç	•		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
MAINTAINING A	MAJORITY		
Mailing Address	918 PENNSYLVANIA AVE SE		
	WASHINGTON	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC S
Connected		oint Fundraising Represent	ative Leadership PAC S
Connected esignated Agent: Identify	Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee X J	pint Fundraising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee by name, address (phone number – optional)	pint Fundraising Represent	
esignated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee by name, address (phone number – optional)	pint Fundraising Represent	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor affety deposit boxes or main	Organization Affiliated Committee by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Organization Affiliated Committee by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	Organization Affiliated Committee by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor understy deposit boxes or mail arme of Bank, epository, etc.	Organization Affiliated Committee by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin ç	ı Participant:			
	1		FEC ID	number	C
	2.		FEC ID) number	C
	3		FEC ID) number	C
	4		FEC ID) number	C
6.	Name of Any Connected (Organization, Affiliated Committee, Joint	Fundraising Rep	presentative	e, or Leadership PAC Sponsor
	Mailing Address	918 Pennsylvania Ave SE			
		Washington		DC	20003
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	X Joint Fundraising	g Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optic	onal)		
	Full Name				
	Mailing Address				
		1	1	1 1	
	TITLE OR POSITION	▼ CITY ▲		STATE A	ZIP CODE ▲
			Telephone N	umber	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank,	ies: List all banks or other depositories in ntains funds.	which the commit	ttee deposit	s funds, holds accounts, rents
	Depository, etc.				
	Mailing Address				
ı		CITY ▲	;	STATE A	ZIP CODE ▲

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

(h). Joint Fundraisi	ig Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
HOLD THE HOU	SE FRONTLINE FUND		
Mailing Address	401 2ND AVENUE SOUTH		
	SUITE 303		
	SEATTLE	, , WA	98104
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	od Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sr
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	EFundraising Represent	Leadership PAC Sp
		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		E Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi 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 Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6,

(h). Joint Fundraisin			1	FEC ID	number	C
1					number	C
2.						
3.) number	C
4.				FEC ID	number	C
	_		tee, Joint Fun	draising Rep	resentativ	e, or Leadership PAC Spor
FIERCE ON THE	FRONTLIN	E				
Mailing Address	910 17TH ST	NW STE 925				
	WASHINGTO	ON			DC	20006
Relationship:		CITY A			STATE A	ZIP CODE ▲
Connected	d Organization	Affiliated Comm	nittee X Joi	int Fundraising	Represent	tative Leadership PAC S
				int Fundraising	Represent	tative Leadership PAC S
				int Fundraising	Represent	tative Leadership PAC S
esignated Agent: Identify				int Fundraising	Represent	Leadership PAC S
esignated Agent: Identif				int Fundraising	Represent	Leadership PAC S
esignated Agent: Identif	y by name, addr		er – optional)		Represent	Leadership PAC S
esignated Agent: Identif	y by name, addr	ress (phone numb	er – optional)		Represent	
esignated Agent: Identify Full Name Mailing Address	y by name, addr	ress (phone numb	er – optional)		STATE A	
esignated Agent: Identify Full Name	y by name, addr	ress (phone numb	er – optional)	Telephone No	STATE A	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	y by name, addr	ress (phone numb	er – optional)	Telephone No	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail arms of Bank,	y by name, addr	ress (phone numb	er – optional)	Telephone No	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail arms of Bank,	y by name, addr	ress (phone numb	er – optional)	Telephone No	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mailame of Bank, repository, etc	y by name, addr	ress (phone numb	er – optional)	Telephone No	STATE A	ZIP CODE A

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

(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
HOUSE VICTORY	Y PROJECT 2020		
Mailing Address	918 PENNSYLVANIA AVE SE		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Spo
Connected Connected Connected Connected Connected			ative Leadership PAC Spo
Connected	d Organization		ative Leadership PAC Spo
Connected Connected Connected Connected Connected	d Organization		ative Leadership PAC Spo
Connected Pesignated Agent: Identify Full Name	d Organization		ative Leadership PAC Spo
Connected Pesignated Agent: Identify Full Name	d Organization		ative Leadership PAC Spo
Pesignated Agent: Identify Full Name Mailing Address	Affiliated Committee Joint by name, address (phone number – optional)		
Connected Pesignated Agent: Identify Full Name	Affiliated Committee y by name, address (phone number – optional) CITY	Fundraising Representation	
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y Joint by name, address (phone number – optional) CITY CITY Te	Fundraising Representation	ZIP CODE A

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
SECOND SERV	ICE VICTORY FUND		
Mailing Address	2910 E GARY WAY		
	PHOENIX	AZ	85042
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint Joint ify by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identi	ify by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	ify by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	ify by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	ify by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	ify by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Mailing Address TITLE OR POSITION	▼ ries: List all banl	CITY A ss or other depositories in	Telephone I		ZIP CODE ZIP CODE s funds, holds accounts, rent
Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or main arms of Bank, epository, etc.	▼ ries: List all banl	CITY A	Telephone I	Number	ZIP CODE ▲
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or maintain and the state of Bank,	▼ ries: List all banl	CITY A	Telephone I	Number	ZIP CODE ▲
Mailing Address TITLE OR POSITION anks or Other Depositor	▼ ries: List all banl	CITY A	Telephone I	Number	ZIP CODE ▲
Mailing Address					
Mailing Address					
Mailing Address				STATE A	
				1 . 1	1
				1 1 1 1	
I uli Ivallie					
esignated Agent: Identify	/ by name, addre	ess (phone number – optio	onal)	1	
Connected	d Organization	Affiliated Committee	X Joint Fundraisin	g Represent	ative Leadership PAC Sp
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
	Washington			DC	20006
	Suite 925	<u> </u>			
Mailing Address	910 17TH ST	NW 			
ame of Any Connected NEW CONGRES		ffiliated Committee, Joint	t Fundraising Re	presentativ	e, or Leadership PAC Spon
4.					<u> </u>
.				D number	C
3.				D number	C
3.			I FFC I	D number	C
2					

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

(h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representativ	e, or Leadership PAC Spon
MEECA VICTOR	Y FUND		
Mailing Address	910 17TH ST NW STE 925		
	WASHINGTON	DC	20006
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
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