Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Democratic Party of Wisconsin 15 N. Pinckney St. ADDRESS (number and street) Suite 200 (Check if address is changed) Madison 53703 WI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS greg@wisdems.org (Check if address is changed) Optional Second E-Mail Address chris@pattonprocessing.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.wisdems.org (Check if address is changed) DATE 20 2018 C00019331 FEC IDENTIFICATION NUMBER > 3. X 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. Udell, Randy, A.,, Type or Print Name of Treasurer Udell, Randy, A.,, [Electronically Filed] 80 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
	COMMITTEE & 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. (Cominformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	nmittee: (National, State	(Democratic
(d) x	This committee is a STA or subordinate) committee of the DEM	(Democratic, Republican, etc.) Party
Political A	action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is
	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 se 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.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to	vo or more political
	committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, page fundraicing expanses and disburses not proceed for the	vo 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.	vo or more political
Con	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	

FEC Form 1 (Revised 0	2/2009)	Page 3
Write or Type Committee Name		
Democratic Part	ty of Wisconsin	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or L	.eadership PAC Sponsor
DNC WI State Party Vi	ctory Fund	
	400 0 - 11 0 - 21 0 - 25	
Mailing Address	430 South Capital St SE	
	Washington DC 2 CITY STATE	20003 ZIP CODE
Relationship: Connected	Organization X Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Ident books and records. 	ify by name, address (phone number optional) and position of the person	1 in possession of committee
Full Name Udell, Rand	ty, A., , 15 N. Pinckney St. Suite 200	
	Madison WI 5	53703
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 608	
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and ssistant treasurer).	the name and address of
Full Name Udell, Rand of Treasurer		
Mailing Address	15 N. Pinckney St.	
	Suite 200	
	Madison WI 5 CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number 608	

FEC Form	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, holds exes or maintains funds. Depository, etc.	, 40004116, 10116
safety deposit bo Name of Bank, D	oxes or maintains funds.	
safety deposit bo	Depository, etc. BMO Harris Bank (formerly M&I)	
safety deposit bo Name of Bank, D	Depository, etc. BMO Harris Bank (formerly M&I)	
safety deposit bo Name of Bank, D	Depository, etc. BMO Harris Bank (formerly M&I) 770 N. Water St Milwaukee WI 53202	ZIP CODE
safety deposit bo Name of Bank, D	Depository, etc. BMO Harris Bank (formerly M&I) 770 N. Water St Milwaukee CITY STATE	
safety deposit bo Name of Bank, E Mailing Address	Depository, etc. BMO Harris Bank (formerly M&I) 770 N. Water St Milwaukee CITY STATE Depository, etc.	
safety deposit bo Name of Bank, E Mailing Address	Depository, etc. BMO Harris Bank (formerly M&I) 770 N. Water St Milwaukee CITY STATE Depository, etc.	
Safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Depository, etc. BMO Harris Bank (formerly M&I) 770 N. Water St Milwaukee CITY STATE Depository, etc. Amalgamated Bank	

FEC Form 1S (Revised 02/2017)

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	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Dollars for Demo	crats		
	430 South Capitol St SE		
Mailing Address			
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Solution Join y by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representa	
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY T	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, Summ	y by name, address (phone number – optional) CITY CITY Tories: 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 Deposited afety deposit boxes or marked and a second contents.	y by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Tries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Tries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisir	<u>, , , , , , , , , , , , , , , , , , , </u>	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Baldwin Wisconsi	n victory Fund		
Mailing Address	15 North Pinckney St #200		
Maining Address			
	Madison	ı WI	53703
Relationship:	CITY A	STATE A	ZIP CODE A
I	311 –	017112	
	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Represents	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identif Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material deposit boxes	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions are of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material deposit boxes	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions are of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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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	С	
3.			FEC ID	number	С	
4.			FEC ID	number	С	
		Organization, Affiliated Committee, Joronts Victory Fund	oint Fundraising Rep	resentative	e, or Leadership F	PAC Sponsor
N	Mailing Address	430 South Capitol Street SE			1 1 1 1 1	
		1				
		Washington		DC	20003	1-1
F	Relationship:	CITY ▲		STATE A	ZIP C	CODE A
	Connected	Organization Affiliated Committee	Joint Fundraising	Representa	ative Leaders	hip PAC Sponsor
	nated Agent: Identify	by name, address (phone number – o	ptional)			
Ma	ailing Address					
ТІ	TLE OR POSITION	CITY A	<u> </u>	STATE A	ZIP CC	DDE A
ТІ	TLE OR POSITION	CITY A	S Telephone Nu		ZIP CC	DDE A
9. Banks safety Name		ies: List all banks or other depositories	Telephone Nu	ımber]-[
9. Banks safety Name Deposi	or Other Depositori deposit boxes or main of Bank, itory, etc.	ies: List all banks or other depositories	Telephone Nu	ımber]-[
9. Banks safety Name Deposi	or Other Depositori deposit boxes or main of Bank,	ies: List all banks or other depositories	Telephone Nu	ımber]-[
9. Banks safety Name Deposi	or Other Depositori deposit boxes or main of Bank, itory, etc.	ies: List all banks or other depositories	Telephone Nu	ımber]-[

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

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1.	g Participant:			
I		FEC I	D number	С
2.	<u> </u>	FEC I	D number	С
3.		FEC I	D number	C
4.		FEC I	D number	С
Name of Any Connected	Organization, Affiliated Committee, J	oint Fundraising Re	presentativ	e, or Leadership PAC Spons
BIDEN VICTORY	FUND			
Mailing Address	430 SOUTH CAPITOL STREET SE			
	WASHINGTON		DC	20003
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Full Name				
Mailing Address				
	CITY		CTATE A	7ID CODE 4
TITLE OR POSITION	CITY A		STATE A	ZIP CODE ▲
TITLE OR POSITION	▼ CITY ▲			
ks or Other Depositor ty deposit boxes or ma ne of Bank, pository, etc.	ries: List all banks or other depositorie intains funds.	Telephone It	Number	s funds, holds accounts, rents
	ries: List all banks or other depositorie intains funds.	s in which the comm	Number	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

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

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
BADGER VICTO	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	15 N. PINCKNEY STREET		
	SUITE 200		
	MADISON	wi	53703
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A City A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A City A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A City A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A City A pries: List all banks or other depositories in which	Telephone Number	