FEC FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Kari Lake for Senate

ADDRESS (number and street) ☐ (Check if address is changed) PO Box 34341
Phoenix, AZ 85067

COMMITTEE’S E-MAIL ADDRESS ☐ (Check if address is changed) yk@100squaredfinancial.com
Optional Second E-Mail Address
kari@karilake.com

COMMITTEE’S WEB PAGE ADDRESS (URL) ☐ (Check if address is changed)

2. DATE 10/02/2023

3. FEC IDENTIFICATION NUMBER ▶ C00852343

4. 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.

Type or Print Name of Treasurer Khalaf, Youssef, 

Signature of Treasurer Khalaf, Youssef, 

Date 10/03/2023

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.
5. TYPE OF COMMITTEE:

### Candidate 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. (Complete the candidate information below.)
- **(c)** This committee supports/opposes only one candidate, and is NOT an authorized committee.

<table>
<thead>
<tr>
<th>Name of Candidate</th>
<th>Lake, Kari</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Candidate Party Affiliation</th>
<th>REP</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Office Sought</th>
<th>House</th>
<th>Senate</th>
<th>President</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th>AZ</th>
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</thead>
</table>

<table>
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<tr>
<th>District</th>
<th>00</th>
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</table>

### Party Committee:

- **(d)** This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party

### Political Action Committee (PAC):

- **(e)** This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation
  - Membership Organization
  - Corporation w/o Capital Stock
  - Trade Association
  - Labor Organization
  - 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 segregated fund or party committee. (i.e., nonconnected committee)

  - 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 PAC).

  - 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 or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

- **(j)** This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

<table>
<thead>
<tr>
<th>Committees Participating in Joint Fundraiser</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
</tbody>
</table>
Write or Type Committee Name

Kari Lake for Senate

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

NONE

Mailing Address

Relationship: □ Connected Organization □ Affiliated Organization □ Joint Fundraising 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.

Full Name

Khalaf, Youssef, , ,

Mailing Address

PO Box 34341

Phoenix AZ 85067

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number 480 203 6798

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 of Treasurer

Khalaf, Youssef, , ,

Mailing Address

PO Box 34341

Phoenix AZ 85067

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼

Telephone number 480 203 6798
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.

Wells Fargo

Mailing Address 8196 S Power Rd.

Gilbert AZ 85297

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲