FEC FORM 1		STATEN ORGAN					Office Us	PAGE 1 / 5 —
1. NAME OF COMMITTEE (in	ı full)	× (Check if nam is changed)		ample:If typing, r the lines.	, type	12FE4	M5	
					RG)			
ADDRESS (number a	nd street)	515 S. FIGUEROA ST.	, STE. 1110					
(Check if a is changed	address 1)							
Ŭ							90071	
		CITY 🔺				STATE ▲		ZIP CODE▲
COMMITTEE'S E-MA								
× < (Check if a is changed		sosfilings@politicallay	v.com					
		Optional Second E-M	ail Address					
COMMITTEE'S WEB	address	DRESS (URL) VRGorg.org						
2. DATE 04	4 / D 4 05							
3. FEC IDENTIFIC	CATION NU	IMBER ► C	C 008748	75				
4. IS THIS STATEM	IENT	NEW (N)	R	AMENDE	ED (A)			
I certify that I have e	examined th	is Statement and to the	best of my	knowledge and	d belief it i	s true, corr	rect and com	plete.
Type or Print Name	of Treasurer	DAVIDSON, CARY, , ,						
Signature of Treasure	er DAVII	DSON, CARY, , ,				Date	04 / D	5 / Y Y Y Y 2024
NOTE: Submission of	false, errone	ous, or incomplete inform ANY CHANGE IN INF	-					ties of 52 U.S.C. §301
Office Use Only				For further info Federal Election Toll Free 800-42 Local 202-694-1	n Commission 24-9530			C FORM 1 vised 06/2012)

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5. TYPE OF COMMITTEE:								
Candidate Committee:								
(a) This committee is a principal campaign committee. (Complete the candidate information below	w.)							
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)								
Name of Candidate								
Candidate Office	State							
Party Affiliation Sought: House Senate Presid	lent District							
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.								
Name of Candidate								
Party Committee: (National, State (Democratic, (d) This committee is a (national, State (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (Democratic, (De								
Political Action Committee (PAC):								
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	connected 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 committee. (i.e., nonconnected committee)	segregated 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) X 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).							

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.
 Committees Participating in Joint Fundraiser
 2.

In addition, this committee is a Lobbyist/Registrant PAC.

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Write or Type Committee Name	
VOTERS FOR RESPONSIVE GOVERNMENT (VRG)	

6.	Name of Any	Conn	ected	Orga	anizati	on,	Af	filiat	ted	Сс	m	nit	tee	, Jo	oint	t F	une	dra	isir	Ig	Rej	ore	sei	ntal	ive	, 01	r L	ead	lers	ship) P/	AC	Sp	ons	sor	
	None																																			
	Mailing Addres	SS		L																														<u> </u>		
				L																																
				L																													L			
										(CIT	Y											ST/	ΑΤΕ						ZII	ΡC		DE 4			
	Relationship:	C	onnecte	ed Or	ganizat	tion		A	ffilia	ited	Or	rgar	niza	tior	I		J	oint	Fu	ndr	aisi	ng	Re	pre	sen	tativ	/e			Lea	.der	ship	אר נ	٩C	Spo	nsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

DAVIDSO	I, CARY, , ,	
Full Name		
Mailing Address	515 S. FIGUEROA ST., STE. 1110	
	LOS ANGELES	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position ▼		
Custodian of Records	Telephone number 213 - 624 - 6200	

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	DAVIDSON, CARY, , ,	<u> </u>	
Mailing Address	515 S. FIGUEROA ST., STE. 1110		
	LOS ANGELES	CA 90071	
	CITY 🔺	STATE 🔺	ZIP CODE
Title or Position	7		
Treasurer	<u>, , , , , , , , , , , , , , , , , , , </u>	Telephone number	624 - 6200

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Full Name of Designated Agent	FARR, MICHAEL, , ,	
Mailing Address	515 S. FIGUEROA ST., STE. 1110	
	LOS ANGELES CA 90071	
	CITY A STATE A Z	ZIP CODE 🔺
Title or Position	,	
Assistant Treasur	er Telephone number ²¹³ 6	6200

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.

Mailing Address	550 S. HOPE ST., #100		
			90071
	CITY 🔺	STATE 🔺	ZIP CODE
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY ▲	STATE 🔺	ZIP CODE ▲

:97 A = G79 @ G5 B9CIG H9LH F9 @ 5 H98 HC 5 F9DCFH 2G7 < 98 I @ CF + H9A = N5 H= CB

Form/Schedule: F1A Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, inkind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: