Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. eaders We Deserve 611 Pennsylvania Ave SE #192 ADDRESS (number and street) (Check if address is changed) Washington DC 20003 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS contact@beecompliance.co (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://leaderswedeserve.com/ (Check if address is changed) DATE 16 2023 C00843110 FEC IDENTIFICATION NUMBER > 3. 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. Lata, Kevin, , , Type or Print Name of Treasurer Lata, Kevin, , , [Electronically Filed] 06 2023 Signature of Treasurer Date 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

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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. (Comple information below.)	ete the candidate			
Name of Candidate				
Candidate Office Party Affiliation Sought: House Senate President	State			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Biolifet			
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the Repub	cratic, lican, etc.) Party			
Political Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a:			
Corporation Corporation w/o Capital Stock Lab	oor Organization			
Membership Organization Trade Association Cod	operative			
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 (Hybridian Committee)	rid PAC).			
In addition, this committee is a Lobbyist/Registrant PAC.				
Joint Fundraising Representative:				
	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.			
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				
1C				

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٧	Vrite or Type Committee Name		2.01
	Leaders We De	eserve	
6.	Name of Any Connected On NONE	rganization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative	e Leadership PAC Sponso
7.	Custodian of Records: Identi	fy by name, address (phone number optional) and position of the person in	possession of committee
	Lata, Kevin	,,,	
	Full Name		
	Mailing Address	611 Pennsylvania Ave SE #192	
			<u> </u>
		Washington	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	5	<u> </u>
	Treasurer	Telephone number	
8.	any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; an assistant treasurer).	nd the name and address of
	Full Name Lata, Kevin of Treasurer	 	
	Mailing Address	611 Pennsylvania Ave SE #192	
			<u> </u>
		Washington DC	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	

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Full Name of Designated Agent						
Mailing Address						
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲			
	Telephone num	ber				
Banks or Other Depositori safety deposit boxes or main	es: List all banks or other depositories in which the committed trains funds.	e deposits funds, holds	s accounts, rents			
Name of Bank, Depository, e	etc.					
Amalgamated Bank						
Mailing Address	275 Seventh Avenue					
	New York	NY 10001				
	CITY A	STATE A	ZIP CODE ▲			
Name of Bank, Depository, e	etc.					
Mailing Address						
	CITY A	STATE ▲	ZIP CODE ▲			