**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Professional Firefighters for Arizona 61 E Columbus Ave ADDRESS (number and street) (Check if address is changed) Phoenix 85012 ΑZ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address jorge@tmwcompliance.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00826800 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT NEW (N) 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 Badillo, Jorge, , Date 02 16 2024 Signature of Treasurer Badillo, Jorge, , , 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. (Complete the cinformation below.)					
	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.	District			
Name of Candidate					
	Party Committee:				
	(d) This committee is a (National, State or subordinate) committee of the Republican, e	tc.) 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 Corporation w/o Capital Stock Labor Orgo	anization			
	Membership Organization Trade Association Cooperativ	re			
	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 from 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) 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	).			
	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.					
Committees Participating in Joint Fundraiser					
	1C				

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٧	Vrite or Type Committee	·	- ago c		
	Professiona	al Firefighters for Arizona			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	NONE				
	Mailing Address				
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Co	onnected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso		
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
		adillo, Jorge, , ,			
	Full Name				
	Mailing Address	61 E Columbus Ave			
		Phoenix	85012		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer		375 5363		
8.	<b>Treasurer:</b> 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 B of Treasurer	ladillo, Jorge, , ,			
	Mailing Address	61 E Columbus Ave			
		Phoenix AZ 8	35012 		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
			5363		

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Full Name of Designated Agent	Whitley, Brad, , ,			
Mailing Address	61 E Columbus Ave			
	Phoenix	AZ 85012		
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲	
lile of Position V	Telephone nur	nber		
Banks or Other safety deposit bo	<b>Depositories:</b> List all banks or other depositories in which the committed exes or maintains funds.	ee deposits funds, hold	s accounts, rents	
Name of Bank, D	epository, etc.			
	Amalgamated Bank			
Mailing Address				
	New York	NY 1 10001		
	CITY ▲	STATE ▲	ZIP CODE ▲	
Name of Bank, Depository, etc.				
Mailing Address				
	CITY ▲	STATE ▲	ZIP CODE ▲	