STATEMENT OF

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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. Serve America PAC - Restricted PO Box 2013 ADDRESS (number and street) (Check if address is changed) Salem 01970 MA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Darryl@CommonCentsConsulting.net (Check if address is changed) Optional Second E-Mail Address Tara@CommonCentsConsulting.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00656439 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. Tattrie, Darryl, , , Type or Print Name of Treasurer Tattrie, Darryl, , , [Electronically Filed] 07 2017 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 Only

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	olete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	rty Con	nmittee:	
(d)		(National, State	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	nected 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)			gradated fund or party
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

I		
FEC Form 1 (Revised 02	?/2009)	Page 3
Write or Type Committee Name		
Serve America F	PAC - Restricted	
6. Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
SERVE AMERICA PAC	. *	
		<u> </u>
	PO BOX 2013	
Mailing Address		
	SALEM	
	SALLIN	
	CITY STATE ZI	P CODE
Relationship: Connected	Organization 🗶 Affiliated Committee Joint Fundraising Representative Leader	ership PAC Sponsor
 Custodian of Records: Identification books and records. 	ify by name, address (phone number optional) and position of the person in posse	ssion of committee
Tattrie, Darr	yl, , ,	
Full Name	PO Box 2013	
Mailing Address	_	
	01070	
	Salem MA 01970	
Title or Position	CITY STATE ZII	P CODE
Treasurer	Telephone number	
8. Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the name sistant treasurer).	and address of
Full Name Tattrie, Darr	yl, , ,	
Mailing Address	PO Box 2013	
	Salem MA 01970	-
TO 00 11	CITY STATE ZIF	P CODE
Title or Position Treasurer	Telephone number	

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Full Name of Designated Agent	Ireton, Victoria, , ,	
Mailing Address	PO Box 2013	
	Salem CITY STATE Z	ZIP CODE
Title or Position Assistant Treasu		
	Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds. Depository, etc.	accounts, rents
	Amalgamated Bank	
Mailing Address	1825 K St NW	
	Washington DC 20006	
	CITY STATE Z	ZIP CODE
Name of Bank, [Depository, etc.	
Mailing Address		
	CITY STATE Z	ZIP CODE

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

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h). Joint Fundraisi	•		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected Seth Moulton	Organization, Affiliated Committee, Joint Fur	ndraising Representativ	re, or Leadership PAC Spon
Mailing Address	PO Box 2013		
	Salem	MA MA	01970
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Jorgy by name, address (phone number – optional)	oint Fundraising Represent	tative
		pint Fundraising Represent	tative Leadership PAC S
esignated Agent: Identif		pint Fundraising Represent	Leadership PAC S
esignated Agent: Identif		pint Fundraising Represent	Leadership PAC S
esignated Agent: Identif		pint Fundraising Represent	Leadership PAC S
esignated Agent: Identif	by by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC S
esignated Agent: Identif	by by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	cy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in which	STATE Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in which	STATE Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in which	STATE Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in which	STATE Telephone Number	ZIP CODE A

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

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(h). Joint Fundraisi	ig Participant.		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponse
Mailing Address	PO BOX 2013		
	SALEM	MA	01970
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Spo
Designated Agent: Identi	Affiliated Committee Jointy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Spo
		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identif		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identif		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identing Full Name Mailing Address	by by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identif	by by name, address (phone number – optional) CITY		
Pesignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite trafety deposit boxes or make the safety deposit boxes or ma	cy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A