# STATEMENT OF

PAGE 1 / 13 -

FEC FORM 1			ANIZ		_					C	Office U	lse Only	,	
1. NAME OF COMMITTEE (in	n full)	(Check is chan	if name		le:If typin	ng, type		12F	'E4M	_				
Pennsylvar	•													
ADDRESS (number a	nd street)	229 State St												
(Check if a is changed					1 1 1		1 1			ı		1 1		
is changed	1)	Harrisburg CITY						PA   STAT	E 🛦	17	101	ZIP	- L	
COMMITTEE'S E-MA	AIL ADDRES	SS												
(Check if a is changed		jalen@pade	ms.com											
		Optional Secon	d E-Mail Add	dress S.COM										
COMMITTEE'S WEB  (Check if a is changed	address	www.padems.cc	om 											
2. DATE 00	6 23	7 Y Y Y Y 2021	Y											
3. FEC IDENTIFIC	CATION NU	MBER ▶	C	00167130										
4. IS THIS STATEM	MENT	NEW (N)	OR	×	AMEN	DED (A	.)							
I certify that I have e	examined thi	s Statement and	to the best	of my kno	wledge a	and belie	ef it is	true,	corre	ct an	d com	plete.		
Type or Print Name	of Treasurer	Conklin, H., Sco	ott, ,											
Signature of Treasure	er <i>Conkli</i> i	n, H., Scott, ,		[E	lectronical	ly Filed]	[	Date	M (	)2		)6		023
NOTE: Submission of	false, errone	ous, or incomplete									pena	lties of	52 U.S	S.C. §3010
Office Use Only				Fe To	or further independent of the second	tion Comr 0-424-9530	mission	tact:					<b>DRM</b> 06/2012	

Local 202-694-1100

FEC	Form	1 (Revised 03/2022)	Page 2
	TYPE C	OF COMMITTEE:	
	Candid	date 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 information below.)	ne candidate
	Name Candid		
	Candid Party	date Affiliation Office Sought: House Senate President	State
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
		ne of didate	
-	Party (	Committee:	
	(d) <b>x</b>	This committee is a STA (National, State DEM (Democrati	c, , etc.) Party
	-	of cuboramate) committee of the	
	Politica	al Action Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
		Corporation Corporation w/o Capital Stock Labor C	Organization
		Membership Organization Trade Association Cooper	_
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed 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.)	
	(m)		
	(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 P	AC).
		In addition, this committee is a Lobbyist/Registrant PAC.	
,	Joint F	Fundraising Representative:	
	(i)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	(j)	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.	or more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	C	
	_		

<u>I</u>	FEC Form 1 (Revised 0)	2/2009)			Page <b>3</b>
V	Vrite or Type Committee Name	Democratic Party			
6.	Name of Any Connected Or	rganization, Affiliated Committee	, Joint Fundraising Repr	esentative, or Leade	rship PAC Sponsor
	Casey Keystone Vict				
	Mailing Address	PO Box 58746			
		Philadelphia		PA     19102	
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	ation <b>x</b> Joint Fundraising	Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	ify by name, address (phone numbe	er optional) and position c	of the person in posses	sion of committee
	Nix, Jalen, ,	, ,			
	Full Name				
	Mailing Address	229 State St			
		Harrisburg		PA 17101	
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Operations Director		Telephone num	nber	920   8470
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optionassistant treasurer).	nal) of the treasurer of the	committee; and the r	name and address of
	Full Name Conklin, H.,	Scott, ,			
	of Treasurer				
	Mailing Address	229 State St			
		Harrisburg		PA 17101	
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone num	nber 717 - [	920   8470

FEC Form 1 (Revised	d 02/2009)		Page <b>4</b>
Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone number	
Banks or Other Depositor safety deposit boxes or ma	ories: List all banks or other depositories in aintains funds.	which the committee deposits fu	nds, holds accounts, rents
Name of Bank, Depository	, etc.		
Amalo	gamated Bank		
Mailing Address	1825 K St NW		
	Washington	DC	20006
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Depository	, etc.		
PNC I	Bank		
Mailing Address	1600 Market St		
	Philadelphia	PA PA	19102
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Page \_5 **of** \_13\_\_

(h). <b>Joint Fundraisir</b>	g Participant:			
1			FEC ID number	С
2			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
	=	ted Committee, Joint Fundr Cratic National Comn		e, or Leadership PAC Spons
DIVO Services Co				
Mailing Address	Victory Fund			
	430 South Capitol S	Street, SE		
	Washington		DC	20003
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Af	ffiliated Committee	Fundraising Representa	ative Leadership PAC Spo
Full Name	<u> </u>			
<b>3</b>				
	1			
		CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	<b>\</b>	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	<b>▼</b>	ı		ZIP CODE A
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or		STATE ▲ elephone Number	ZIP CODE   ZIP CODE   s funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or ma	ories: List all banks or aintains funds.		STATE ▲ elephone Number	
Banks or Other Depositors afety deposit boxes or management of Bank, Depository, etc.	eries: List all banks or aintains funds.  amated Bank  275 Seventh Ave		STATE A elephone Number the committee deposit	s funds, holds accounts, rents
Banks or Other Depositors afety deposit boxes or management of Bank, Depository, etc.	eries: List all banks or aintains funds.  amated Bank		STATE ▲ elephone Number	

FEC Form 1S (Revised 02/2017)

Page \_6\_ **of** \_13\_\_

or(h). <b>Joint Fundraisi</b> r	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
	sroots Victory Fund		
Mailing Address	430 South Capitol Street SE		
	Washington	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Spon
Full Name Mailing Address	y by name, address (phone number – optional		
Mailing Address			
	CITY ▲	STATE A	ZIP CODE ▲
TITLE OR POSITION	•	1	
		Telephone Number	
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in whaintains funds.	ich the committee deposit	ts funds, holds accounts, rents
Name of Bank, Centra Depository, etc.	al Bank		1 1 1 1 1 1 1 1 1 1 1
Mailing Address	300 West Vine St		
	Lexington	KY KY	40507

FEC Form 1S (Revised 02/2017)

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

Page \_\_\_\_ **of** \_\_\_\_\_\_

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected Dollars for Demo	Organization, Affiliated Committee, Joint Fund Crats	draising Representative	e, or Leadership PAC Spon
Mailing Address	430 S Capitol Street SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization	nt Fundraising Representa	ativa I Laadarshin PAC Sr
	y by name, address (phone number – optional)	and and group to proceed	Leadership TAO of
			Leadership PAC Sp
esignated Agent: Identif			Leadership FAO Op
esignated Agent: Identif			
esignated Agent: Identif			
esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or me	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make the property of the property	y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which aintains funds.  Of America	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make the property of the property	y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which aintains funds.  Of America	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page \_8 **of** \_13\_\_

g) or (h). <b>Joint Fundraisin</b>	g Participant:			
., , , 1.   , , , , , , , , , , , , , , , , , ,	<b>.</b>		FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
Name of Any Connected	Organization, Affiliated Con	nmittee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
Houlahan Victory	Fund			
	DO Dou 50204			
Mailing Address	PO Box 58381			
	Philadelphia		PA PA	19102
Relationship:	CIT	ΓΥ 🛦	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated (	Committee X Joint	Fundraising Representa	Leadership PAC Sponsor
Designated Agent: Identify  Full Name	by name, address (phone n	number - optional)		
Mailing Address				
, and the second				
			1 1 1	
	_ CITY	<b>'</b>	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	•			[_] [_]
		<u>                                     </u>	elephone Number	
Banks or Other Deposito safety deposit boxes or ma		depositories in which	the committee deposit	s funds, holds accounts, rents
Name of Bank, Depository, etc.				
Mailing Address				
	CITY	, <sub>A</sub>	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

Page \_\_\_ **of** \_\_\_\_\_\_

(h). <b>Joint Fundraisi</b>	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Mailing Address	PO Box 414		
			10504
	Scranton	L PA	18501
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Jo	int Fundraising Representa	ative Leadership PAC Sp
Pesignated Agent: Identif		int Fundraising Representa	Leadership PAC Spo
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identif		int Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identif	y by name, address (phone number – optional)	int Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identing Full Name  Mailing Address	by by name, address (phone number – optional)  CITY		
Pesignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Canks or Other Deposite afety deposit boxes or make the property of the proposition of Bank, depository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

Page \_\_\_\_ **of** \_\_\_\_\_

(h). Joint Fundraisin	g Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected Biden Victory Fun	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Light Victory 1 dri	u 		
Mailing Address	430 South Capitol Street SE		
	Washington	DC	20003
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connected  Connected  Connected  Connected  Connected		nt Fundraising Represent	ative Leadership PAC Spo
Connected	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name  Mailing Address	Affiliated Committee   Affiliated Committee   Affiliated Committee   Affiliated Committee   CITY   Affiliated Committee   Affiliated Comm	nt Fundraising Represent	ative Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	Affiliated Committee		
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  y Join  by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito cafety deposit boxes or mail	Affiliated Committee  y Join  by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	Affiliated Committee  y Join  by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	Affiliated Committee  y Join  by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page \_\_\_\_\_ **of** \_\_\_\_\_

5(g) o	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	114 BEAUCHAMP LANE		
		LAFAYETTE	LA	70506
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	undraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Namo			
	Full Name			
	Full Name			
	<u> </u>			
	<u> </u>			
	<u> </u>	CITY A	STATE A	ZIP CODE A
	Mailing Address	▼ CITY ▲		
	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma	CITY A  Tele	STATE ▲	ZIP CODE A
	Mailing Address  TITLE OR POSITION  Banks or Other Depositor	CITY A  Tele	STATE ▲	ZIP CODE A
	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank,	CITY A  Tele	STATE ▲	ZIP CODE A
	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mathematical mathematical deposit boxes or mathematical mathematical depository, etc.	CITY A  Tele	STATE ▲	ZIP CODE A
	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mathematical mathematical deposit boxes or mathematical mathematical depository, etc.	CITY A  Tele	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page \_\_\_\_ **of** \_\_\_\_\_

h). Joint Fundraisin		FEC ID number	С
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Wild for PA Victor	y Fund		
Mailing Address	600 Pennsylvania Avenue SE		
<b>3</b>	#15180		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC S
Connected		t Fundraising Representa	Leadership PAC S
Connected	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee Join  y by name, address (phone number – optional)		
esignated Agent: Identify Full Name	Affiliated Committee Join  y by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee  y by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Tries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mail ame of Bank, epository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Tries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Tries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mail ame of Bank, epository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Tries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page \_\_\_\_ **of** \_\_\_\_\_

TITLE OR POSITION  anks or Other Depositor afety deposit boxes or material depository, etc.  Mailing Address	ries: List all banks	CITY A  or other depositories in which	STATE  Telephone Number  th the committee deposi	zip code 🛦
anks or Other Depositorafety deposit boxes or management of Bank, repository, etc.	ries: List all banks	CITY A	Telephone Number	
anks or Other Depositor	ries: List all banks	CITY A	Telephone Number	
anks or Other Depositor	ries: List all banks	CITY A	Telephone Number	
	▼	CITY A	Telephone Number	
TITLE OR POSITION			1	ZIP CODE ▲
TITLE OR POSITION			STATE ▲	ZIP CODE ▲
	1			
Mailing Address				
Full Name				
esignated Agent: Identify	y by name, address	(phone number – optional)		
Connected	d Organization	Affiliated Committee	int Fundraising Represent	tative Leadership PAC Sp
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
	Philadelphia		PA	19110
Mailing Address	PO Box 22611		<u>                                     </u>	
Fetterman Victory				
ame of Any Connected	Organization, Affili	ated Committee, Joint Fur	draising Representativ	re, or Leadership PAC Spons
4.			FEC ID number	С
. 1			FEC ID number	С
3.			FEC ID number	С
				C