## 2019:00:18:0M:00094817

FEC FORM 1

## STATEMENT OF ORGANIZATION

RESERVES FEC MAIL CENTER

TORWIT				2819 SEF	18 11 8:51		
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, over the lines.	type 12FE4M	15		
Porter Fergusor	Victory L	<u> </u>	· 				
				1 1 1 1 1 1		Ш	
ADDRESS (number and street)  (Check if address is changed)		611 Pennsylvania Ave SE					
		Num 143					
	[7	Waşhington CITY ▲	111111	DC STATE	20003,	ا	
COMMITTEE'S E-MAI	IL ADDRESS						
☐ ◀ (Check if ad is changed)		ldecot@mbacg.co	<u>)</u>			لــــــــــــــــــــــــــــــــــــــ	
		ptional Second E-Mail A smele@mbacg.co			· 		
COMMITTEE'S WEB	PAGE ADDRE	SS (URL)					
(Check if a is changed)	ddress )			111111			
e de la persona	L	11111111	<del></del>	111111			
2. DATE 09	13	2019					
3. FEC IDENTIFIC	ATION NUME	BER • C					
4. IS THIS STATEM	ENT 🔀	NEW (N) OR	AMENDE	D (A)			
I certify that I have ex	xamined this S	Statement and to the bes	st of my knowledge and	belief it is true, corre	ect and complete.		
Type or Print Name o	f Treasurer	Lauren Lee					
Signature of Treasure	, A	allen s	le	Date C	9 / 13 / 2019	Y • • • • • • • • • • • • • • • • • • •	
NOTE: Submission of fa		o, or incomplete information			to the penalties of 52 U.S.C.	§30109.	
Office Use Only			For further infor Federal Election Toll Free 800-424 Local 202-694-11	Commission I-9530	FEC FORM 1 (Revised 06/2012)		

	PEC F	Page 2						
j.		COMMITTEE						
		$\cdot$						
	(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 candidate information below.)						
	Name of Candidate							
	Candidate Party Affilia	Office State Senate President District						
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of . Candidate							
	Party Co	rty Committee:						
	(d)	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) 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 Organization						
	١	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 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.)						
	Joint Fur	ndraising Representative:						
	(g) ×	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.						
	(h)	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.						
	· Co	mmittees Participating in Joint Fundraiser						
	1.	Katile Porter for Congress						
	2.	Firiends of Bob Ferguson - PDC ID FERGR 115   FEC ID number C Non-Federal						
	3.	FEC ID number C						
	4.	FEC ID number C						

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Write or Type Committee Na	ime	
Porter Ferguson Vic	tory	
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
None		
Mailing Address		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	i eadership PAC Sponsor
Tiolane il simple	Thinking Control of the Control of t	
Full Name Laure  Mailing Address  Title or Position	en Lee  [6,11,Pennsylvania Ave SE]  [Num 143]  [Washington]  [DC]  [20]  CITY  STATE	0003,  -
Treasurer	Telephone number	
3. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and th	e name and address of
Full Name Laure	en Lee	
Mailing Address	6,11,Pennsylvania Ave SE	<u> </u>
	Num 143	<u>i + 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </u>
	Washington 20 CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	

. .

CITY

STATE

ZIP CODE

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## Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.			
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Other (Specify):			
) ·	Q 19-1G		
	9-18-19		
PREPARER	DATE PREPARED		

(3/2015)