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. Kevin McCarthy for Congress PO Box 12667 ADDRESS (number and street) (Check if address is changed) Bakersfield CA 93389-2667 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address info@campaignfinancial.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.mccarthyforcongress.com (Check if address is changed) DATE 2024 C00420935 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 Thomson, Jill, , Date 11 25 2024 Signature of Treasurer Thomson, Jill, , , 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

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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.)	e candidate
Name of Candidate McCarthy, Kevin, , ,	<u> </u>
Candidate Party Affiliation REP Office Sought: House Senate President	State CA District 20
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Diotriot 20
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republican,	•
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connecte	d organization is a:
Corporation Corporation w/o Capital Stock Labor O	rganization
Membership Organization Trade Association Coopera	tive
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 committee. (i.e., nonconnected committee)	d 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.)	
(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 PA	C).
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 o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
Committees Participating in Joint Fundraiser	
1	

J	FEC Form 1 (Revised 0)	2/2009)			Page 3
۷	Vrite or Type Committee Name	for Consumo			
6.	Kevin McCarthy Name of Any Connected Or	TOF CONGRESS rganization, Affiliated Committee,	Joint Fundraising Repre	esentative, or Le	eadership PAC Sponsor
	McCarthy Victory Fur			,	
		PO Box 30844			
	Mailing Address	·			
		Bethesda		MD 2	0824-
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	tion X Joint Fundraising	Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone numbe	r optional) and position c	of the person in po	ssession of committee
	CFS, Comp	oliance, , ,			
	Full Name	PO Box 30844			
	Mailing Address				
		Bethesda		MD 20	0824-0844
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Custodian of Records		Telephone num	301 	_ 654 3220
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number option assistant treasurer).	nal) of the treasurer of the	committee; and	the name and address of
	Full Name Thomson,	Jill, , ,			
	of Treasurer	PO Box 30844			
	Mailing Address				
		Bethesda		MD 2	0824-0844
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone num	nber 301	_ 654 3220

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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	ries: List all banks or other depositories in wintains funds.	which the committee deposits fun	ds, holds accounts, rents
Name of Bank, Depository,	etc.		
Cantor	Fitzgerald		
Mailing Address	110 East 59th Street		
	21st Floor		
	New York	NY	10022
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Depository,	etc.		
Citizen	s Business Bank		
Mailing Address	3600 Riverlakes Drive		
	Bakersfield	CA	93312
	CITY ▲	STATE ▲	ZIP CODE ▲

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

1.					
0			FEC ID	number	С
2.			FEC ID	number	С
3.			FEC ID	number	C
4.			FEC ID	number	С
lame of Any Conn	ected Organization,	Affiliated Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spons
Protect the Hou	_				
Mailing Addres	PO Box 308	344 			
	Bethesda			MD	20824-0844
Relationship:		CITY A		STATE A	ZIP CODE ▲
	nnected Organization	Affiliated Committee	al)		
			al)		
esignated Agent:			al)		
esignated Agent:			al)		
esignated Agent:			nal)		
esignated Agent:	Identify by name, add			STATE A	ZIP CODE A

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

1. 2. 3. 4. 4. Mailing Address	ganization, Affiliate	ed Committee, Joint F	FEC	D number D number D number D number	C C C e, or Leadership PAC S	\$pons
3. 4. And Connected Or	ganization, Affiliate	ed Committee, Joint F	FEC	D number D number	C	Spons
4. Name of Any Connected Or	ganization, Affiliate	ed Committee, Joint F	FEC I	D number	C	Spons
4. Name of Any Connected Or	ganization, Affiliate	ed Committee, Joint F				>pons
Name of Any Connected Or	ganization, Affiliate	ed Committee, Joint F	Fundraising Re	presentativ	e, or Leadership PAC S	Spons
	ganization, Affiliate	ed Committee, Joint F	undraising Re	epresentativ	e, or Leadership PAC \$	Spons
Mailing Address						100
Mailing Address						
Mailing Address						
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ا Relationship:		CITY A		STATE A	ZIP CODE	
Connected O	п.	iliated Committee	Joint Fundraisir	_		
Full Name						
Mailing Address						
l						
l						
TITLE OR POSITION ▼		CITY ▲		STATE ▲	ZIP CODE 4	k
			Telephone I	Number		
Banks or Other Depositories safety deposit boxes or maint	ains funds.		hich the comm	ittee deposit	s funds, holds accounts,	, rents
Depository, etc.			1 1 1 1 1	1 1 1 1		
Mailing Address	Bakersfield			CA	193309	

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

ganization, Affiliated Committee, Joint	FEC ID number	or C
	FEC ID numbe	or C
	FEC ID numbe	r C
ganization, Affiliated Committee, Joint	Fundraising Representa	tive, or Leadership PAC Spo
CITY A	STATE	ZIP CODE A
CITY A	STATE A	ZIP CODE A
_	rganization Affiliated Committee y name, address (phone number – optional	

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

		FEC ID number	C
		FEC ID number	С
		FEC ID number	С
		FEC ID number	C
rganization, Affiliated Commit	ttee, Joint Fundrais	ing Representative	e, or Leadership PAC Spons
CITY A		STATE A	ZIP CODE A
by name, address (phone numb	per – optional)		
	per – optional)		
	per – optional)		
	per – optional)		
by name, address (phone numb	per – optional)	CTATE A	7ID CODE A
	per – optional)	STATE A	ZIP CODE A
	CITY	CITY A	

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

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			FEC ID number	C
			FEC ID number	С
3			FEC ID number	C
4.			FEC ID number	C
lame of Any Connected	Organization, Affiliated C	Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
Mailing Address				
		CITY A	STATE A	ZIP CODE A
Relationship:			0.7.1.2.2	2 0002 =
		ed Committee Join	t Fundraising Represent	ative Leadership PAC Sp
Connecte Designated Agent: Identif	d Organization Affiliate	ed Committee Join	t Fundraising Represent	ative Leadership PAC Sp
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Connecte Pesignated Agent: Identif	d Organization Affiliate	ed Committee Join	t Fundraising Represent	ative Leadership PAC Sp
Connecte resignated Agent: Identif	d Organization Affiliate y by name, address (phone	ed Committee Join e number – optional)		
Connecte Pesignated Agent: Identif	d Organization Affiliate y by name, address (phone	ed Committee Join	t Fundraising Represent	Leadership PAC Sp