FEC

Only

STATEMENT OF

PAGE 1 / 4

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Pound for Senate 3843 S Bristol St STE 604 ADDRESS (number and street) (Check if address is changed) Santa Ana 92704 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address lysaray.campaignservices@gmail.com is changed) Optional Second E-Mail Address lysaray.campaignservices@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.perrypound.com (Check if address is changed) DATE 2023 C00849620 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 Ray, Lysa, , Date 12 19 2023 Signature of Treasurer Ray, Lysa, , , 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 information below.) | the candidate | |
| Name of Candidate Pound, Perry, , , | | |
| Candidate Party Affiliation DEM Office Sought: House X Senate President | State CA District 00 | |
| (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. | | |
| Name of Candidate | | |
| Party Committee: | | |
| (d) This committee is a (National, State or subordinate) committee of the Republication | atic, an, etc.) Party | |
| Political Action Committee (PAC): | | |
| (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected | cted organization is a: | |
| Corporation Corporation w/o Capital Stock Labor | · Organization | |
| Membership Organization Trade Association Coope | erative | |
| In addition, this committee is a Lobbyist/Registrant PAC. | | |
| (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee. (i.e., nonconnected committee) | ated 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 | 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 committees/organizations, at least one of which is an authorized committee of a federal candidate. | o or more political | |
| (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 | | |
| 1 C | | |

| | FEC Form 1 (Revised 0 | 12/2009) | Page 3 |
|------------|---|---|-------------------------|
| ٧ | Vrite or Type Committee Name | | |
| | Pound for Senat | e | |
| 6 . | Name of Any Connected O | rganization, Affiliated Committee, Joint Fundraising Representative, or Leader | ship PAC Sponsor |
| | NONE | | |
| | | | |
| | Mailing Address | | |
| | | | |
| | | | - |
| | | CITY ▲ STATE ▲ | ZIP CODE ▲ |
| | Polationship: Connected | Organization Affiliated Organization Joint Fundraising Representative | Leadership PAC Sponso |
| | Relationship: Connected | Organization John Fundralsing Representative | Leadership FAC Sponso |
| <u>.</u> | Custodian of Records: Ident books and records. | ify by name, address (phone number optional) and position of the person in possess | sion of committee |
| | Ray, Lysa, | | |
| | Full Name | ,, | |
| | Mailing Address | 3843 S Bristol St STE 604 | |
| | | I | |
| | | Santa Ana CA 92704 | |
| | | CITY ▲ STATE ▲ | ZIP CODE ▲ |
| | Title or Position ▼ | | |
| | Treasurer | | 540 |
| 3. | Treasurer: List the name an any designated agent (e.g., a | d address (phone number optional) of the treasurer of the committee; and the nassistant treasurer). | ame and address of |
| | Full Name Ray, Lysa, of Treasurer | ,, | |
| | | ₁ 3843 S Bristol St STE 604 | |
| | Mailing Address | | |
| | | | |
| | | Santa Ana CA 92704 | |
| | Title or Position ▼ | CITY ▲ STATE ▲ | ZIP CODE ▲ |
| | Treasurer | | 540 2295 |
| | | Telephone number | |

| FEC Form 1 | (Revised 02/2009) | Page 4 | | |
|-------------------------------------|--|---------------------|--|--|
| Full Name of Designated Agent | | | | |
| Mailing Address | | | | |
| | | | | |
| | | | | |
| Title or Position | CITY ▲ STATE ▲ | ZIP CODE ▲ | | |
| | | | | |
| | Depositories: List all banks or other depositories in which the committee deposits funds, however or maintains funds. | lds accounts, rents | | |
| Name of Bank, Depository, etc. | | | | |
| | First Foundation | | | |
| Mailing Address | 18101 Von Karman Ave #700 | | | |
| | | | | |
| | Irvine | | | |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ | | |
| Name of Bank, Depository, etc. | | | | |
| | Bank of America | | | |
| Mailing Address | 3730 S Bristol St | | | |
| | | | | |
| | Santa Ana CA 92704 | | | |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ | | |