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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Zoe 2024 c/o Contribution Solutions, LLC ADDRESS (number and street) 1346 The Alameda #7-380 (Check if address is changed) San Jose 95126 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS almaycastillo@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 12 05 2021 C00693655 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. Castillo, Alma, , , Type or Print Name of Treasurer Castillo, Alma, , , [Electronically Filed] 05 2022 Signature of Treasurer Date 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 Only

Local 202-694-1100

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TYPE OF COMMITTEE:				
Candidate 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 candic information below.)				
Name of Candidate				
Candidate Office Party Affiliation Sought: House Senate	State President District			
(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	(Democratic, 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			
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 sepacommittee. (i.e., nonconnected committee)	arate segregated 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 acco	ounts (Hybrid PAC).			
In addition, this committee is a Lobbyist/Registrant PAC.				
Joint Fundraising Representative:				
(1) X	(i) 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.			
(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				
Lofgren for Congress	C00289603			
Mainstream PAC	C00343574			

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٧	Vrite or Type Committee Name			
	Zoe 2024			
i .	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE			
	Mailing Address			
		CITY ▲ STATE ▲	ZIP CODE ▲	
	Relationship: Connected	Organization	e Leadership PAC Sponso	
			_	
<u>.</u>	Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person in	possession of committee	
	Castillo, Alr	ma, , ,		
	Full Name			
	Mailing Address	1346 The Alameda		
		#7-380		
		San Jose CA	95126	
		CITY ▲ STATE ▲	ZIP CODE ▲	
	Title or Position ▼	SINIE 4	ZIF CODE =	
	Treasurer	Telephone number	673 - 1030	
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and any designated agent (e.g., assistant treasurer).				
	Full Name Castillo, Alr	na, , ,		
	of Treasurer	4040 The Alexandr		
	Mailing Address	1346 The Alameda		
		#7-380		
		San Jose CA	95126	
	T11	CITY ▲ STATE ▲	ZIP CODE ▲	
	Title or Position ▼		070	
	Treasurer		_ 673 _ 1030	

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Full Name of	1041304 02/2003)	Tage 4
Designated Agent		
Mailing Address		
Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
The of Fosition •		I_I I
	Telephone number	
Banks or Other De safety deposit boxes	positories: List all banks or other depositories in which the committee deposits funds, hos or maintains funds.	olds accounts, rents
Name of Bank, Dep	ository, etc.	
C	Comerica Bank	
Mailing Address	333 W. Santa Clara Street	
	San Jose CA 95113	3
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, Dep	ository, etc.	
L		
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

Change of committee name from Zoe 2022 to Zoe 2024.

Form/Schedule: Transaction ID: