03/26/2019 09 : 51

FEC FORM 1	STATEMEN ORGANIZ		Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
ADDRESS (number and street)	3107 W Place, SE		
(Check if address is changed)	Washington CITY ▲		DC 20020   STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRI	ESS		
<ul><li>(Check if address is changed)</li></ul>	vwinpisinger@gmail.co	<b>m</b>	
	Optional Second E-Mail Add	dress	
COMMITTEE'S WEB PAGE AD	DRESS (URL)		
	6 / Y Y Y Y 2019		
3. FEC IDENTIFICATION N	UMBER ► C co	00700203	
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	Plaskett, Miles, , ,		
Signature of Treasurer	kett, Miles, , ,	[Electronically Filed]	Date 03 / 26 / Y Y Y Y
NOTE: Submission of false, error		may subject the person signing the NAN SHOULD BE REPORTED WI	nis Statement to the penalties of 2 U.S.C. §437g. ITHIN 10 DAYS.
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

FFC FC	rm 1 (Revised 02/2009)	Page <b>2</b>
	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. (Compliinformation below.)	ete the candidate
Name of Candidate		· · · · · · <u>· · · ·</u>
Candidate Party Affiliat	on Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	nmittee:	
(d)		Democratic, epublican, etc.) Party
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is
	Corporation V/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	Iraising Representative:	
(g)	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
(h)	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
Corr	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name

## Grange PAC

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Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6.

Plaskett, Stac	y, C, , 	
Mailing Address	PO Box 1006	
	Frederiksted     VI     00841	
	CITY STATE ZIP CODE	
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spon	sor
7. Custodian of Rebooks and record	cords: Identify by name, address (phone number optional) and position of the person in possession of committ S.	ee
Full Name	Winpisinger, Vickie, , ,	
Mailing Address	315 Inspiration Lane	
	Gaithersburg MD20878 MD20878	

Title or Position	CITY	STATE	ZIP CODE
Assistant Treasurer		Telephone number	947 0278

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Plaskett, Miles, , ,
Mailing Address	201 South Biscayne Blvd
	Suite 3400
	Miami
	CITY STATE ZIP CODE
Title or Position Treasurer	Image: Telephone number 305 205 1962

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Full Name of Designated Agent														1	1								1			
Mailing Address																										
			1																L			1				
							CI	ΓY								STA	ΤE				ZIF	р С	OD	θE		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

B	ank of America	
Mailing Address	1048 Quince Orchard Blvd	
	Gaithersburg	MD 20878
	CITY	STATE ZIP CODE
Name of Bank, Depo	ository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE