03/20/2024 16 : 37

STATEMENT OF
ORGANIZATION

	STATEMEN		1	PAGE 1 / 5
FEC FORM 1	ORGANIZA		05	ce Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Let America Vote F	PAC			
ADDRESS (number and street)	PO Box 66005			
(Check if address is changed)				
	Washington			35
	CITY ▲		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
 (Check if address is changed) 	compliance@endcitizensuni	ted.org		
	Optional Second E-Mail Add kimberly@endcitizensunited.org			
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)	https://www.letamericavote.org	g/		
				<u> </u>
2. DATE 03 / 1	9 / 2024			
3. FEC IDENTIFICATION N	UMBER ► C co	0632398		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined the	his Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
		, ,	,	·
Type or Print Name of Treasure	r Coleman, Kimberly, , ,			
Signature of Treasurer Cole	man, Kimberly, , ,		Date 03	17 / Y Y Y Y Y 2024
NOTE: Submission of false, erron		may subject the person signing ION SHOULD BE REPORTED		enalties of 52 U.S.C. §30109
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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5. TYPE OF	COMMITTEE:	
Candida	te Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate
Name o Candida		
Candida Party At		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
(0)		
Name Candio		
(d)	ommittee: (National, State (Democrat This committee is a or subordinate) committee of the Republican	ic, n, etc.) Party
	Action Committee (PAC):	rad arganization is a:
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	led organization is a:
	Corporation Corporation w/o Capital Stock Labor	Organization
	Membership Organization Trade Association Cooper	rative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregat committee. (i.e., nonconnected committee)	ed 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 F	PAC).

Joint Fundraising Representative:

(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
 2.

In addition, this committee is a Lobbyist/Registrant PAC.

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٧	Nrite or Type Committee Name		
	Let America Vote PAC		
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Spo	onsor
	End Citizens United		
	PO Box 66005		

Mailing Address				
	Washington			5
	(STATE A	ZIP CODE
Relationship: Connected C	Drganization X Affiliated	Organization Joint Fu	indraising Representative	Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Coleman, I	imberly, , ,	
Full Name		
Mailing Address	PO Box 66005	
	Washington DC 20035	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position ▼		
Treasurer	Telephone number 202 - 798 - 5253	

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	Coleman, Kimberly, , ,
Mailing Address	PO Box 66005
	Washington DC 20035
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Treasurer	Image: Second

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Full Name of Designated Agent	Bogden, Amanda, , ,	
Mailing Address	PO Box 66005	
	Washington DC	20035
	CITY A STATE A	ZIP CODE
Title or Position	▼	
Assistant Treasur	rer Telephone number	

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.

	Amalgamated Bank		
Mailing Address	1825 K Street NW		
	Washington		06
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, I	Depository, etc.		
Mailing Address			
	CITY 🔺	STATE A	ZIP CODE ▲

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

5(g)	or(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO Box 66005		
		Washington		20035
	Relationship:	CITY A	STATE ▲	
	Connected	Organization X Affiliated Committee	undraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number - optional)		
	Mailing Address			
	TITLE OR POSITION		STATE ▲	ZIP CODE 🔺
		1	phone Number	
9.	safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositories in which th intains funds.		s funds, holds accounts, rents
	Mailing Address			
I			STATE ▲	