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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Committee to Elect Richard Ojeda 533 Bungalow Woods Drive ADDRESS (number and street) PO Box 624 (Check if address is changed) Holden 25625 WV CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS brian@pcmsllc.com (Check if address is changed) Optional Second E-Mail Address stevenhall@voteojeda.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://voteojeda.com/ (Check if address is changed) DATE 2018 C00639989 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR 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. Hall, Steven, , Mr, Type or Print Name of Treasurer Hall, Steven, , Mr, [Electronically Filed] 12 2018 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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

TYPE OF COMMITTEE Candidate Committee: (a)		FF6 =	4 (Decire d. 00/0000)	D
Candidate Committee: (a)				Page 2
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Party Affiliation DEM Office Sought: X House Senate President District 03 (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 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 Cooperative 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 fund or party committee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC. (g) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC. (g) 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. Committees Participating in Joint Fundraiser 1. FEC ID number C 2. FEC ID number C 3. FEC ID number C				
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Party Committee: (d) This committee is a			DEM	State 03
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4. $\mid \cdot \mid $		4.		

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	i aye J
Committee to Elect Richard Ojeda	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hin PAC Snonsor
	1 110 Opolisoi
Sapper Fund	
231 Capitol Street Mailing Address	
Charleston WV 25301	
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee X Joint Fundraising Representative Lea	adership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in pos books and records. 	session of committee
Hall, Steven, , Mr, Full Name	
5297 Kelly Road Mailing Address	
Apt 4	
Cross Lanes WV 25313	_
Title or Position CITY STATE	ZIP CODE
Treasurer Telephone number Telephone number	307 - 1209
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	me and address of
Full Name Hall, Steven, , Mr, of Treasurer	
Mailing Address [5297 Kelly Road	
Apt 4	
Cross Lanes	
	ZIP CODE
Title or Position Treasurer Telephone number	307 1209

T LC T OI	rm 1 (Revised 02/2009)	
Full Name of Designated Agent	Graham, David, , Mr,	
Mailing Address	665 Allegheny Ave	
	Peach Creek WV 25629	
Title or Decition	CITY STATE	ZIP CODE
Title or Position Assistant Treas		688 7241
	er Depositories: List all banks or other depositories in which the committee deposits funds, hold boxes or maintains funds.	ds accounts, rents
<i>y</i> 1		
	, Depository, etc.	
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Name of Bank,	Depository, etc. Woodforest 77 Norman Morgan Blvd	
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Name of Bank, Mailing Address	Woodforest 77 Norman Morgan Blvd Logan WW 25601	ZIP CODE
Name of Bank, Mailing Address	Woodforest 77 Norman Morgan Blvd Logan CITY STATE	ZIP CODE
Name of Bank, Mailing Address	Woodforest 77 Norman Morgan Blvd Logan CITY STATE Mountain Valley Bank 400 Washington St E	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Woodforest 77 Norman Morgan Blvd Logan CITY STATE Mountain Valley Bank 400 Washington St E	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Woodforest 77 Norman Morgan Blvd Logan CITY STATE Mountain Valley Bank 400 Washington St E	ZIP CODE

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

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (

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4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
The Arena Candid	date PAC Win Fund		
Mailing Address	611 Pennsylvania Ave SE		
Maining Address	Num 143		
	Washington	DC	20003
Relationship:	CITY A	STATE A	ZIP CODE ▲
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	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
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FEC Form 1S (Revised 02/2017)

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

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Mailing Address 910 17th St NW, Ste 925 Suite 925 Washington Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC S esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number			FEC ID number	С
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Suite 925 Washington CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC S esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number				
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Connected Organization		Washington	DC	20006
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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2					FEC ID numb	er C	
3					FEC ID numb	er C	
4.					FEC ID numb	oer C	
	Connected O		filiated Committee,	Joint Fundra	ising Represent	ative, o	r Leadership PAC Spons
Mailing A	Address	918 Pennsylva	nia Ave SE				
		Washington		1 1 1 1		;	20003
Relations	ship:		CITY A		STAT	 E ▲	ZIP CODE ▲
	Connected	Organization	Affiliated Committee	✗ Joint F	Fundraising Repre	sentative	Leadership PAC Sp
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