Only

PAGE 1 / 4 =

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. The Moderate PAC, Inc. 100 M Street, SE ADDRESS (number and street) Suite 600 (Check if address is changed) Washington DC 20003 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS marysuestrong@the-moderate.org (Check if address is changed) Optional Second E-Mail Address tystrong@the-moderate.org COMMITTEE'S WEB PAGE ADDRESS (URL) www.the-moderate.org (Check if address is changed) DATE 2021 C00790089 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. Strong, Marysue, , , Type or Print Name of Treasurer Strong, Marysue, , , [Electronically Filed] 08 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

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2			
. 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 corinformation below.)	mmittee. (Complete the candidate			
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 or	n line 6.) Its connected organization is a:			
	The state of the state of			
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 committee. (i.e., nonconnected committee)	a separate segregated fund or party			
In addition, this committee is a Lobbyist/Registrant PAC.				
In addition, this committee is a Leadership PAC. (Identify sponsor on lin	ne 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 no committees/organizations, at least one of which is an authorized committee of a f	•			
(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 02/2009)	Page 3
٧	/rite or Type Comr	mittee Name	
	The Mod	derate PAC, Inc.	
6.		Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
	Dalatianahin		-
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Re books and record	ecords: Identify by name, address (phone number optional) and position of the person in posserds.	ession of committee
		Strong, Marysue, , ,	
	Full Name		
	Mailing Address	100 M Street, SE	1
	g	Suite 600	
		Washington DC 2000)3
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position	▼	
	Treasurer		704 - 3000
3.		the name and address (phone number optional) of the treasurer of the committee; and the agent (e.g., assistant treasurer).	name and address of
	Full Name	Strong, Marysue, , ,	
	of Treasurer		
	Mailing Address	100 M Street, SE	
		Suite 600	
		Washington DC 2000)3
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position	▼	
	Treasurer		704 - 3000

FEC Form 1	(Revised 02/2009)		Page 4		
Full Name of Designated			. age :		
Agent					
Mailing Address					
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲		
	Telephone r	number			
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the commes or maintains funds.	nittee deposits t	funds, holds accounts, rents		
Name of Bank, D	epository, etc.				
	Eagle Bank				
Mailing Address	1228 Connecticut Ave, NW				
	1				
	Washington	DC	20036		
	CITY A	STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲	STATE ▲	ZIP CODE ▲		