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PAGE 1 / 13

STATEMENT ()F
ORGANIZATIC)N

FEC FORM 1	STATEMEN ORGANIZA	-	Office	PAGE 1 / 13
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Gallego For Arizo	na 			
	PO Box 1710			
ADDRESS (number and street)				
 (Check if address is changed) 				
<i>,</i>	Phoenix │ │ │ │ │ │ │ │ │ │ │ │ │ CITY ▲		AZ 85001 1	
COMMITTEE'S E-MAIL ADDF	RESS			
(Check if address is changed)	janica@pcmsllc.com			
	Optional Second E-Mail Add	ress		
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)			
2. DATE 03	11 / Y Y Y Y 2024			
3. FEC IDENTIFICATION	NUMBER ► C CO	0558627		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined	this Statement and to the best of	of my knowledge and belief it i	s true, correct and co	mplete.
Type or Print Name of Treasu	rer Herrera, Roy, , ,			
Signature of Treasurer He	rrera, Roy, , ,		Date 05	08 / Y Y Y Y 2024
NOTE: Submission of false, erro	oneous, or incomplete information n ANY CHANGE IN INFORMAT	nay subject the person signing th ION SHOULD BE REPORTED V		nalties of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	n FE	C FORM 1 Revised 06/2012)

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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. (Com information below.)	plete the candidate
Name of Gallego, Ruben, , , Candidate	
Candidate Office Sought House X Senate Presider	State AZ
Party Affiliation DEM Sought: House X Senate Presider	nt District 00
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
(d) This committee is a	mocratic, publican, etc.) Party
Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its c	connected organization is a
	Labor Organization
Membership Organization	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 se committee. (i.e., nonconnected committee)	egregated 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).	

(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.

In addition, this committee is a Lobbyist/Registrant 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.

Relationship:

Connected Organization

	FEC Form 1 (Revised 0	2/2009)																					Pa	age	3		
W	Irite or Type Committee Name																										
	Gallego For Arizo	ona																									
6.	Name of Any Connected Or	rganization, Affiliat	ed Co	ommi	ttee,	Joi	nt F	⁼un	dra	isin	ıg F	Rep	res	en	tati	ve,	or	٢L	ead	ler	shi	ip I	PA	C S	ipo.	nsc	or
															_												
	Mailing Address	PO BOX 65322											<u> </u>		L	<u> </u>	_										
				<u> </u>											C ⊥]		2	2003	35				- [
			C	CITY									S	TA	TE						Z	ΊP	СС)DE	E 🔺		

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

X Joint Fundraising Representative

Leadership PAC Sponsor

Affiliated Organization

Kyriacopou	ulos, Janica, , ,			
Full Name				
Mailing Address	PO Box 65322			
	Washington		DC 20035	
	CITY ▲		STATE 🔺	ZIP CODE
Title or Position ▼				
Asst. Treasurer		Telephone nur	mber 202 –	628 - 1580

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	Herrera, Roy, , ,
of Treasurer	
Mailing Address	PO Box 1710
	Phoenix AZ 85001
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image:

FEC Form 1 (Revised 02	2/2	20	09))																						Pa	ge	4	
Full Name of Designated Agent			1						1			[1							
Mailing Address	L																												
	L																												
	L																					L					- [
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Title or Position ▼																													
														Tele	epł	non	e n	um	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.

W	/ells Fargo		
Mailing Address	100 W. Washington St.		
	Phoenix	AZ 85003	
	CITY A	STATE A	ZIP CODE ▲
Name of Bank, Depo	ository, etc.		
Ba	ank of America		
Mailing Address	1801 K St NW		
	Washington	DC 20006	
	CITY A	STATE A	ZIP CODE ▲

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

) or (h).	Joint Fundraising	Participant:			
1.			FEC ID numb	ber C	
2.			FEC ID numb	ber C	
3.			FEC ID numb	ber C	
4.			FEC ID numb	ber C	
Name	of Any Connected O	rganization, Affiliated Committee, Joint Fur	draising Represent	ative, or Lead	ership PAC Sponsor
GA					
١	Mailing Address	611 PENNSYLVANIA AVE SE			
		#143			
					3
F	Relationship:	CITY A	STATI	 E ▲	
	Connected 0	Organization Affiliated Committee X Jo	int Fundraising Repre	sentative	Leadership PAC Sponsor
-	Il Name	by name, address (phone number – optional)			
Ma	ailing Address				
-			STATE		
1	ITLE OR POSITION V	, 	The state New York	1 [_]	[_]
			Telephone Number		
	or Other Depositorie deposit boxes or main	es: List all banks or other depositories in white tains funds.	ch the committee de	posits funds, ho	olds accounts, rents
	of Bank, Amalgar	nated Bank			
	-	1825 K St NW			
	Mailing Address	<u> </u>	<u> </u>		
		Washington		· · · · · · · · · · · · · · · · · · ·	
				20006	-

STATE 🔺

ZIP CODE

1.			
		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fundra	ising Representativ	e, or Leadership PAC Sponsor
SERVE AMERICA			· · · · ·
Mailing Address	PO BOX 2013		
	SALEM	MA	01970
		STATE A	ZIP CODE
Relationship:		Fundraising Represent	ative Leadership PAC Spon
Connect		Fundraising Represent	ative Leadership PAC Spons
Connect Connect Cesignated Agent: Ident Full Name	ed Organization	Fundraising Represent	ative Leadership PAC Spons
Connect	ed Organization	Fundraising Represent	ative Leadership PAC Spons
Connect Connect Cesignated Agent: Ident Full Name	ed Organization	Fundraising Represent	ative Leadership PAC Spons
Connect	Affiliated Committee Solution		
Connect Connect Cesignated Agent: Ident Full Name	Affiliated Committee Solution Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spons

5(g) c	or (h). Joint Fundraisin	g Participant:					
	1.			FEC ID	number	С	
	2.			FEC ID	number	С	
	3.			FEC ID	number	С	
	4.			FEC ID	number	С	
6.	Name of Any Connected	Organization, Affil	liated Committee, Joint	Fundraising Rep	resentative	, or Leadership I	PAC Sponsor
	2024 GREEN SENAT	Е 					
	Mailing Address	120 MARYLAND) AVE NE				
		WASHINGTON			DC	20002	
	Relationship:				STATE A	ZIP (
	Connected	d Organization	Affiliated Committee	imes Joint Fundraising	Representat	tive Leaders	hip PAC Sponsor
8.	Designated Agent: Identify	v by name, address	s (phone number – optic	onal)			
	Mailing Address						
	TITLE OR POSITION	V		S		ZIP CC	
		·		Telephone Nu	umber	– [
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks iintains funds.	or other depositories in	which the committ	tee deposits	funds, holds acc	ounts, rents
	Name of Bank, Depository, etc.						
	Mailing Address						
1			CITY 🔺	S	STATE 🔺	ZIP CC	DDE 🔺

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
6. Name	e of Anv Connected O	rganization, Affiliated Committee, Joint Fund	Iraising Representative	. or Leadership PAC Sponsor
	Mailing Address	600 PENNSYLVANIA AVE SE #15180		
				20003
	Relationship:		STATE 🔺	ZIP CODE
8. Desig	nated Agent: Identify I	by name, address (phone number - optional)		
	nated Agent: Identify I ull Name	by name, address (phone number - optional)		
Fu		by name, address (phone number - optional)		
Fu	ull Name	by name, address (phone number - optional)		
Fu	ull Name	by name, address (phone number - optional)		
Fu	ull Name			
Fu	ull Name <u> </u>		L L L L L STATE ▲ Felephone Number	
Fu M 1 9. Banks	ull Name	CITY ▲	Felephone Number	
Fu M 9. Banks safety Name	ull Name	CITY ▲	Felephone Number	
Fu M 9. Banks safety Name	ull Name	CITY ▲	Felephone Number	
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5(g) or	(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4		FEC ID number	С
- 6. l	Name of Any Connected	Organization, Affiliated Committee, Joint Func	Iraising Representative	or Leadership PAC Sponsor
-	2024 SENATE IMPAC	•	5 1	,
	Mailing Address	600 PENNSYLVANIA AVE		
		SE #15180		
				20003
	Relationship:		STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Join	nt Fundraising Representa	tive Leadership PAC Sponsor
-				
- 8. [Designated Agent: Identify	by name, address (phone number - optional)		
- 8. [by name, address (phone number - optional)		
- 8. [Full Name	by name, address (phone number - optional)		
- 8. [Full Name	by name, address (phone number - optional)		
- 8. [Full Name			
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	Full Name		Telephone Number	
	Full Name Mailing Address TITLE OR POSITION		Telephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc		Telephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc		Telephone Number	

5(g) or (h).	Joint Fundraising	Participant:	
1.			FEC ID number
2			FEC ID number
3			FEC ID number
4			FEC ID number
	e of Any Connected C EM SENATE VICTO		aising Representative, or Leadership PAC Sponsor
	Mailing Address	611 PENNSYLVANIA AVE SE	<u> </u>
		SUITE 143	
	Relationship:	CITY A	STATE A ZIP CODE A
	Connected	Organization Affiliated Committee X Joint	Fundraising Representative
		by name, address (phone number – optional)	
Ν	Mailing Address		
	TITLE OR POSITION		STATE A ZIP CODE A
L		1	lephone Number
safet <u>y</u> Name	ts or Other Depositori y deposit boxes or main e of Bank, psitory, etc.		the committee deposits funds, holds accounts, rents
	Mailing Address		

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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. N	ame of Any Connected	Organization. Affilia	ated Committee. Joint F	undraising Representative	e, or Leadership PAC Sponsor
		-			
	Mailing Address	PO BOX 65322			
		WASHINGTON			20035
	Relationship:		CITY 🔺	STATE A	
				Joint Fundraising Represent	tive Leadership PAC Sponsor
8. D e	esignated Agent: Identify	by name, address	(priorie number – optiona	1)	
	Full Name				
		1			1
	Mailing Address				
	Mailing Address				
	Mailing Address				
		L			
	Mailing Address	<pre></pre>		Telephone Number	
Sa		ies: List all banks o		Telephone Number	ZIP CODE ▲
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sa	TITLE OR POSITION	ies: List all banks o		Telephone Number	

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5(g) or (h).	Joint Fundraising	Participant:		
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	-	Organization, Affiliated Committee, Joint Fundra	aising Representative	, or Leadership PAC Sponsor
B	lue Senate Candidate	<pre>> Fund</pre>		
	Mailing Address	600 Pennsylvania Ave SE #15180		
		Washington DC		20003
	Relationship:	CITY 🔺	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8. Desi	gnated Agent: Identify	by name, address (phone number - optional)		
	gnated Agent: Identify	by name, address (phone number - optional)		
F		by name, address (phone number - optional)		
F	Full Name	by name, address (phone number - optional)		
F	Full Name	by name, address (phone number - optional)		
F	Full Name			
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5(g) or (h).	Joint Fundraising	g Participant:			
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6. Nam	ne of Any Connected (Organization. Affili	ated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
	H MT AZ Victory Fur	-	,	0	, , ,
	Mailing Address	600 Pennsylvania	Ave SE #15180		
		Washington DC			20002
	Relationship:		CITY A	STATE A	ZIP CODE
	Connected	Organization	Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sponsor
0 Deel					
8. Desi	gnated Agent: Identify	by name, address	(phone number - optional))	
	gnated Agent: Identify	by name, address	(phone number – optional))	
F			(phone number – optional)		
F	Full Name	by name, address	(phone number - optional)		
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ן נו	Full Name	<pre></pre>	CITY	I I I I I I I I I I I I I I I I I I I	
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9. Banl safet Nam	Full Name Mailing Address TITLE OR POSITION ks or Other Depositor ty deposit boxes or mail we of Bank, pository, etc.		CITY A		