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| FEC<br>FORM 1               |                  | STATEMEI<br>ORGANIZ         |  |              | PAGE 1 / 4<br>Office Use Only              |       |
|-----------------------------|------------------|-----------------------------|--|--------------|--|-------|
| 1. NAME OF<br>COMMITTEE (in | n full)          | (Check if name is changed)  | Example:If typing, type over the lines.  | 12FE4        | łM5  |       |
| Win the Era                 | a PAC            |                             |  |              |  |       |
|                             |                  |                             |  |              |  |       |
|                             |                  | DO Day 1226                 |  |              |  |       |
| ADDRESS (number a           | nd street)       | PO Box 1226                 |  |              |  |       |
| (Check if a is changed      |                  |                             |  |              |  |       |
| lo onangoo                  | <i></i>          | South Bend                  |  | IN           | 46624                                      |       |
|                             |                  | CITY ▲                      |  | STATE 🔺      | ZIP CODE                                   |       |
| COMMITTEE'S E-MA            | AIL ADDRES       | S                           |  |              |  |       |
| (Check if a is changed      |                  | compliance@wintheera        | a.com  |              |  |       |
| is changed                  | )                | Optional Second E-Mail Ad   | dress  |              |  |       |
|                             |                  |                             |  |              |  |       |
| COMMITTEE'S WEB             | address          | RESS (URL)                  |  |              |  |       |
| 2. DATE                     | 9 / D 1<br>21    | 2020                        |  |              |  |       |
| 3. FEC IDENTIFIC            | CATION NUI       | MBER ► C c                  | 00697441   |              |  |       |
| 4. IS THIS STATEN           | MENT             | NEW (N) OR                  | X AMENDED (A)  |              |  |       |
| I certify that I have e     | examined this    | s Statement and to the best | of my knowledge and belief it  | is true, cor | rrect and complete.                        |       |
| Type or Print Name          | of Treasurer     | Jordanich, Ed, , ,          |  |              |  |       |
| Signature of Treasure       | er <i>Jordan</i> | ich, Ed, , ,                | [Electronically Filed]   | Date         | 09 / D D / Y Y Y<br>21 2020                | Y     |
| NOTE: Submission of         |                  |                             | may subject the person signing to N SHOULD BE REPORTED W   |              | nt to the penalties of 2 U.S.C. §4<br>AYS. | 137g. |
| Office<br>Use<br>Only       |                  |                             | For further information c<br>Federal Election Commissi<br>Toll Free 800-424-9530<br>Local 202-694-1100 |              | FEC FORM 1<br>(Revised 06/2012)            |       |

| -                           |  |                 |
|-----------------------------|--|-----------------|
| FEC FC                      | Form 1 (Revised 02/2009) Page 2  |                 |
| TYPE OF (                   | COMMITTEE  |                 |
| Candidat                    | te 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. (Complete the candida information below.)  | ate             |
| Name of<br>Candidate        |  |                 |
| Candidate<br>Party Affiliat | ation Office Sought: House Senate President District   |                 |
| (c)                         | This committee supports/opposes only one candidate, and is NOT an authorized committee.  |                 |
| Name of<br>Candidate        |  |                 |
| Party Col                   | ommittee:  |                 |
| (d)                         | This committee is a(National, State<br>or subordinate) committee of the(Democratic,<br>Republican, etc.)   | Party           |
| Political A                 | Action Committee (PAC):  |                 |
| (e)                         | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organizat   | ion is          |
|                             | Corporation Corporation w/o Capital Stock Labor Organiza   | ation           |
|                             | 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 segregated fund or committee. (i.e., nonconnected committee)  | r part <u>y</u> |
|                             | In addition, this committee is a Lobbyist/Registrant PAC.  |                 |
|                             | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)   |                 |
| Joint Fun                   | ndraising Representative:  |                 |
| (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. | al              |
| (h)                         | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politica committees/organizations, none of which is an authorized committee of a federal candidate.          | al              |
| Con                         | mmittees Participating in Joint Fundraiser   |                 |
| 1.                          | FEC ID number  |                 |
| 2.                          | FEC ID number  |                 |
| 3.                          | FEC ID number  |                 |
| 4.                          | FEC ID number  |                 |

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Write or Type Committee Name

## Win the Era PAC

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

| Booker Win The Era   | /ictory Fund   |                                  |                               |
|--|--|----------------------------------|-------------------------------|
|  |  |                                  |                               |
| Mailing Address  | 600 Pennsylvania Ave SE  |                                  |                               |
| -  | #15180   |                                  |                               |
|  | Washington   |                                  | 20003                         |
|  | CITY   | STATE                            | ZIP CODE                      |
| Relationship: Connecte   | d Organization   | Joint Fundraising Representativ  | e Leadership PAC Sponsor      |
| <ol> <li>Custodian of Records: Ide<br/>books and records.</li> </ol> | ntify by name, address (phone number op                        | tional) and position of the pers | on in possession of committee |
| Halle, Mic   | hael, , ,  |                                  |                               |
| Full Name  | ,PO Box 1226   |                                  |                               |
| Mailing Address  |  |                                  |                               |
|  |  |                                  |                               |
|  | South Bend   |                                  | 46624                         |
| Title or Position  | CITY   | STATE                            | ZIP CODE                      |
| Assistant Treasurer  | ]  | Telephone number                 |                               |
| 8. <b>Treasurer:</b> List the name an any designated agent (e.g.,    | d address (phone number optional) of the assistant treasurer). | treasurer of the committee; an   | nd the name and address of    |
| Full Name Jordanich  | , Ed, , ,  |                                  |                               |
| Mailing Address  | PO Box 1226  |                                  |                               |
|  |  |                                  |                               |
|  | South Bend   |                                  | 46624                         |

| Treasurer |                  |  |
|-----------|------------------|--|
|           | Telephone number |  |
|           |                  |  |

FEC Form 1 (Revised 02/2009)

| Full Name of<br>Designated<br>Agent | Halle, Michael, , , |          |
|-------------------------------------|---------------------|----------|
| Mailing Address                     | S PO Box 1226       |          |
|                                     |                     |          |
|                                     | South Bend IN       | 46624    |
|                                     | CITY STATE          | ZIP CODE |
| Title or Position                   |                     |          |

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.

| Amalg                     | amated Bank       |                |
|---------------------------|-------------------|----------------|
| Mailing Address           | 1825 K St NW      |                |
|                           |                   |                |
|                           | Washington        |                |
|                           | CITY              | STATE ZIP CODE |
| Name of Bank, Depository, | etc.              |                |
| 1st So                    | urce Bank         |                |
|                           | 100 N Michigan St |                |
| Mailing Address           |                   |                |
|                           | 1                 |                |
|                           |                   |                |
|                           | South Bend        | IN 46601       |