Image# 202104169443779968			_	PAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ			FAGE 17 4 -
			Offic	ce Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Rising Electorate				
	PO Box 804			
ADDRESS (number and street)				
 (Check if address is changed) 				
	Selma └		CA 9366 	2
COMMITTEE'S E-MAIL ADDR	FSS			
(Check if address is changed)	fec@capcompliance.co	om		
3 <i>'</i>	Optional Second E-Mail Ad	dress		
 (Check if address is changed) 				
	16 / Y Y Y Y 2021			
3. FEC IDENTIFICATION N		00648956		
4. 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 o	complete.
Type or Print Name of Treasur	rer Myles, Josh, , ,			
Signature of Treasurer	es, Josh, , ,	[Electronically Filed]	Date 04	16 / Y Y Y Y 2021
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMAT	may subject the person signing ION SHOULD BE REPORTED V		enalties of 2 U.S.C. §437g
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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TYPE OF (COMMITTEE
	e 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 candidate information below.)
Name of Candidate	
Candidate Party Affiliat	tion Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Particular
Political A	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or par committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fun	draising 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.
(h)	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.
Con	nmittees 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

Rising Electorate PAC

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

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization	Fundraising 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.

Myles, Jos	h, , ,
Full Name	
Mailing Address	600 Pennsylvania Ave SE
	#15180
	Washington DC 20003
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 202 544 6960

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	Myles, Josh, , ,
Mailing Address	600 Pennsylvania Ave SE
	#15180
	Washington DC 20003
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent								1																	1		
Mailing Address																											
		L																									
						1											L			L			1			1	
								CIT	Y								ST	ATE				ZI	р С	COD	θE		
Title or Position																											
												Tele	eph	ione	e ni	uml	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.

	Amalgamated Bank		
Mailing Address	1825 K St NW		
	Washington		20006
	CITY	STATE	ZIP CODE
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE