## FEC FORM 1

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## STATEMENT OF ORGANIZATION

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

16 MAY 13 PM 1:56

(Revised 02/2009)

NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Senate 2016 'ennsvlvania Ave ADDRESS (number and street) (Check if address 20003 is changed) ashington CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) zamore@capcompliance.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE FEC IDENTIFICATION NUMBER IS THIS STATEMENT AMENDED (A) NEW (N) OR I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Judith Zamore Type or Print Name of Treasurer Date Signature of Treasurer 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. For further information contact: Office FEC FORM 1 Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

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|-----------------------------------|--|--------------------|--|--|--|
|                                   | •      |                    |  |  |  |
| ,                                 | Cano   | ildate             | 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. (Complintormation below.)  | ete the candidate                      |  |
|                                   | Name of Candidate                            |                    |  |  |  |
|                                   | Candi<br>Party                               | date<br>Affiliatio | Office Sought: House Senate President  | State                                  |  |
| •                                 | (c)  |                    | This committee supports/opposes only one candidate, and is NOT an authorized committee.  |  |  |
|                                   | Name<br>Candi                                |                    |  |  |  |
|                                   | Part   | y Com              | mittee:  |  |  |
|                                   | (d)  |                    |  | Pemocratic,<br>epublican, etc.) Party. |  |
|                                   | Polit  | ical A             | ction Committee (PAC):   |  |  |
|                                   | (e)  |                    | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected   | ected organization is a:               |  |
|                                   |  |                    | Corporation Corporation w/o Capital Stock  | Labor 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 seg committee. (i.e., nonconnected committee)   | regated 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.)   |  |  |
| Joint Fundraising Representative: |  |                    |  |  |  |
| (                                 | (g)  | $\times$           | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate. | or more political                      |  |
| (                                 | h)   |                    | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.         | or more political                      |  |
|                                   | Committees Participating in Joint Fundraiser |                    |  |  |  |
|                                   |  | 1.                 | Katie McGinty for Senate             FEC ID number C 0058  | 2809                                   |  |
|                                   |  | 2.                 | Strickland for Senate               FEC ID number C 0057   | 3212                                   |  |
|                                   |  | 3.                 | Maggie for NH                   FEC ID number C 0058   | 8772                                   |  |
|                                   |  | 4.                 | FEC ID number  |  |  |

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|---|--|--|--|--|--|
| FEC Form 1 (Revised (   | na/2009) Page <b>3</b>   |  |  |  |  |
| Write or Type Committee Name  |  |  |  |  |  |
| IMPACT Senate   |  |  |  |  |  |
| <u> </u>  | Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor  |  |  |  |  |
| o. Italie of Ally Collictics  | , same and the sam |  |  |  |  |
| None  | <u> </u>   |  |  |  |  |
|   |  |  |  |  |  |
| Mailing Address   |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
|   | CITY STATE ZIP CODE  |  |  |  |  |
| Relationship: Connecte  | d Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor  |  |  |  |  |
| <ol> <li>Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee<br/>books and records.</li> </ol>                              |  |  |  |  |  |
| Full Name Judit   | n Zamore   |  |  |  |  |
| 918 Pennsylvania Ave SE   |  |  |  |  |  |
| Mailing Address   |  |  |  |  |  |
|   | Washington DC 20003, J-  |  |  |  |  |
| Title or Position   | CITY STATE ZIP CODE  |  |  |  |  |
| Treasurer   | Telephone number   |  |  |  |  |
| <ol> <li>Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of<br/>any designated agent (e.g., assistant treasurer).</li> </ol> |  |  |  |  |  |
| Full Name of Treasurer  Judit   | h Zamore   |  |  |  |  |
| Mailing Address   | 918 Pennsylvania Ave SE  |  |  |  |  |
|   |  |  |  |  |  |
|   | Washington DC 20003 J-   |  |  |  |  |
|   | CITY STATE ZIP CODE  |  |  |  |  |

Telephone number

Title or Position

Treasurer

| FEC Form                            | FEC Form 1 (Revised 02/2009)  |                |  |  |  |  |  |
|-------------------------------------|---|----------------|--|--|--|--|--|
|                                     |   | <u> </u>       |  |  |  |  |  |
| Full Name of<br>Designated<br>Agent | Steven Jaņelli  |                |  |  |  |  |  |
| Mailing Address                     | 918 Pennsylvania Ave SE   |                |  |  |  |  |  |
|                                     |   | <u></u>        |  |  |  |  |  |
|                                     | Washington 20003  | ZIP CODE       |  |  |  |  |  |
| Title or Position [Assistant Tr     | easurer Telephone number  | <b></b>        |  |  |  |  |  |
| safety deposit box                  | 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. |                |  |  |  |  |  |
| !                                   | Amaigamated Bank  | <u> </u>       |  |  |  |  |  |
| Mailing Address                     | [1825,K,St NW   |                |  |  |  |  |  |
|                                     |   |                |  |  |  |  |  |
|                                     | [Washington 20006   |                |  |  |  |  |  |
|                                     | CITY STATE  | ZIP CODE       |  |  |  |  |  |
| Name of Bank, De                    | Name of Bank, Depository, etc.  |                |  |  |  |  |  |
| l                                   | <u></u>   | 11111          |  |  |  |  |  |
| Mailing Address                     |   | <u> </u>       |  |  |  |  |  |
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| ,                                   |   |                |  |  |  |  |  |
| ·<br>·<br>·                         | CITY STATE 2  | ZIP CODE       |  |  |  |  |  |
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| 7                                   |   |                |  |  |  |  |  |
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## Faxed or Hand Delivered

DANA K. MACCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232

## United States Senate

OFFICE OF THE SECRETARY

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