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## STATEMENT OF ORGANIZATION

FORM 1	0		C	Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
	ties United			
ADDRESS (number and street)	PO Box 15845			
(Check if address				
is changed)	Washington			0003
	CITY ▲		STATE ▲	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	smele@mbacg.com			
lo onangou)	Optional Second E-Mail Add	dress		
	aspire@mbacg.com			
<ul> <li>is changed)</li> <li>2. DATE</li> </ul>				
3. FEC IDENTIFICATION N	UMBER ► C co	00860411		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	his Statement and to the best	of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name of Treasure	r Mele, Steven, , ,			
Signature of Treasurer Mele	, Steven, , ,		Date 12	/ D D / Y Y Y Y 15 / 2023
NOTE: Submission of false, erron		may subject the person signing t		e penalties of 52 U.S.C. §3010
Office Use Only		For further information of Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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5. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below	w.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Co information below.)	omplete the candidate
Name of Candidate	
Candidate Office	State
Party Affiliation Sought: House Senate Presid	lent District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
(d) The committee is a	Democratic, epublican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	connected organization is a:
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 a separate committee. (i.e., nonconnected committee)	segregated 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) X 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).

## 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
 1.
 2.

In addition, this committee is a Lobbyist/Registrant PAC.

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V	Vrite or Type Committee Name			
	ASPIRE Communities United			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC	Spo	nsor

Mailing Address	L																																
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									CI	ΤY										STA	٩ΤΕ					Z	ΊP	со	DE				
Relationship: Connected (	Эrg	ani	izat	ion	l	,	Affil	ate	ed C	Drga	aniz	atio	n	J	oint	Fu	ndr	aisi	ng	Re	pre	ser	ntati	ve		Le	ade	ersh	ip F	PAC	Sp	onsoi	r

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

	Mele, Steve	n, , ,																									
Full Name																											
Mailing Address		PO Box 1	5845										1														
		Washingt	on												L	DC			2	2000	)3			]-[			
						CI	ΓY 4								S	ΓΑΤ	E 🔺					ZI	РC	OD	E 🔺		
Title or Position	•																										
Treasurer										,	Tele	epho	one	nui	mbe	r	L	20	2			552	2	]-[	(	)221	

Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of 8. any designated agent (e.g., assistant treasurer).

Full Name	Mele, Steven, , ,
of Treasurer	
Mailing Address	PO Box 15845
	Washington         DC         20003
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image: Telephone number     202     552     0221

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Full Name of Designated Agent	Aparicio, Ev, , ,	
Mailing Address	PO Box 15845	
	Washington         DC         20003	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position		
Asst Treasurer	Telephone number	

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			<u> </u>
		CITY 🔺	STATE A	ZIP CODE
Name of Bank, [	Depository, etc.			
Mailing Address				
		CITY ▲	STATE A	ZIP CODE

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