Image# 202404209633562994				04/20/2024 01 : 13
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4 ——
			O	ffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
amplify accessibili				
ADDRESS (number and street)	1004 SAN JOSE AVE SUITE	E 101		
 (Check if address is changed) 				
	CITY ▲		CA 1936 STATE ▲	512
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)	jz@votejz.org			
	Optional Second E-Mail Ad	dress		
☐ ◀ (Check if address is changed)	votejz.org			
	9 / Y Y Y Y 2024			
3. FEC IDENTIFICATION N	IUMBER ► C C	00876706		
4. IS THIS STATEMENT	< NEW (N) OR	AMENDED (A)		
Leartify that I have examined	this Statement and to the best	of my knowledge and heliof	it is true correct and	l complete
I certify that I have examined	this statement and to the best	of my knowledge and belief	it is true, correct and	r complete.
Type or Print Name of Treasur	er murillo, mark, , ,			
Signature of Treasurer mur	illo, mark, , ,		Date 04	20 / Y Y Y Y 2024
NOTE: Submission of false, error		may subject the person signin TION SHOULD BE REPORTE	-	penalties of 52 U.S.C. §3010
Office Use Only		For further information Federal Election Commi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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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. (Comple information below.)	te the candidate
Name of zavala, jorge, roberto, ,	
Candidate Party Affiliation GRE Office Sought: House Senate X President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate Party Committee:	
(d) This committee is a (National, State (Demo or subordinate) committee of the Repub	lican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:
Corporation Corporation w/o Capital Stock	oor Organization
Membership Organization Trade Association Cod	operative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated 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).	
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).

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.

I	FEC Form 1 (Revised (12/2000)																								Par	је З	2	
M	Vrite or Type Committee Name	,																								ray	je J	,	
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	amplify accessib	SIIIT Y	GR	E	ΞN		E	ЪН		,U	A			\mathbf{O}	N														
6.	Name of Any Connected O	rganiza	tion,	Affil	iateo	d Co	omr	nitte	е, .	Joir	nt F	un	dra	isir	ng F	Rep	res	en	tativ	/e,	or	Lea	der	shi	p P	AC	Spe	ons	or
	Mailing Address																											1	
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							CIT	Y 🔺									5	STA	TE 4					Z	P (DE 4		
	Relationship: Connected	Organiz	ation		Affili	atec	d Or	gani	zatio	on	C	J	oint	Fu	Indra	aisii	ng I	Rep	rese	enta	tive			Lea	adei	rship	p PA	AC :	Spons

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

murillo, ma	ark, , ,			
Full Name				
Mailing Address	5630 w morris ave			
	fresno			93722
		CITY 🔺	STATE 🔺	ZIP CODE 🔺
Title or Position ▼				
record agent			Telephone number	9 - 930 - 5852

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	, murillo, mark, , ,
of Treasurer	
Mailing Address	5630 w morris ave
	fresno CA 93722 - - -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	,
	Image:

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Full Name of Designated Agent	murillo, mark, , ,	
Mailing Address	5630 w morris ave	
	fresno CA 93722	
	CITY A STATE A 2	
Title or Position	r	
record agent		030 5852

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. 9.

Telephone number

1

Name of Bank, Depository, etc.

	citi bank																					
Mailing Address		20 w s	haw a	ve											1							
		clovis												CA		93	612			-[
						СІТ	Y 🔺	•					STA	ΑΤΕ				ZIF	Р С	ODE	Ξ▲	
Name of Bank, I	Depository, e	tc.																				
Mailing Address																						
																				-[
						CIT	Y 🔺	•					STA	ΛΤΕ				ZIF	Р С	ODE	Ξ▲	