Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Chrissy Houlahan for Congress PO Box 222 ADDRESS (number and street) (Check if address is changed) Devon 19333 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS janelli@capcompliance.com (Check if address is changed) Optional Second E-Mail Address fec@capcompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.chrissyhoulahanforcongress.com (Check if address is changed) DATE 2023 C00637371 FEC IDENTIFICATION NUMBER 3. X 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 complete. Janelli, Steven, , , Type or Print Name of Treasurer Janelli, Steven, , , [Electronically Filed] 03 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

E	EC Form 1 (Revised 03/2022)	Page 2				
	TYPE OF COMMITTEE:					
	Candidate 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 information below.)	candidate				
	Name of Candidate Houlahan, Chrissy, , ,					
	Candidate Party Affiliation DEM Office Sought: House Senate President	State PA District 06				
	(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 or subordinate) committee of the Republican, e	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 Org	janization				
	Membership Organization Trade Association Cooperation	ve .				
	In addition, this committee is a Lobbyist/Registrant PAC.					
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political				
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political				
	Committees Participating in Joint Fundraiser					
	1. C					

ı	FEC Form 1 (Revised (02/2009)			Page 3
۷	Vrite or Type Committee Name				
		nan for Congress			
6.	Name of Any Connected C Serve America Victor	Organization, Affiliated Committee, Joi Dry Fund	nt Fundraising Represent	tative, or Leader	ship PAC Sponsor
	Li i i i i i i i i i i i i i i i i i i				
	Mailing Address	PO Box 2013			
		Salem		IA 01970	
		CITY ▲	STA	TE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	✗ Joint Fundraising Rep	resentative	Leadership PAC Sponso
7.	Custodian of Records: Iden books and records.	tify by name, address (phone number c	optional) and position of the	person in posses	sion of committee
	Janelli, Ste	even, , ,			
	Full Name				
	Mailing Address	600 Pennsylvania Ave SE			
		#15180			
		Washington	D	C 20003	
		CITY ▲	STA	TE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone number		
8.	any designated agent (e.g.,	·	of the treasurer of the com	nmittee; and the n	ame and address of
	Full Name Janelli, Ste	even, , ,			
	Mailing Address	600 Pennsylvania Ave SE			
	Ç	#15180			
		Washington		DC 20003	
		CITY ▲	STA	TE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone number	202	544 - 6960

Full Name of Designated Agent Mailing Address Mailing Address	
#15180 Washington CITY ▲ STATE ▲ ZIP CODE Title or Position ▼ Assistant Treasurer	
Title or Position ▼ Assistant Treasurer	
	rents
. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, safety deposit boxes or maintains funds.	
Name of Bank, Depository, etc. Amalgamated Bank	
Mailing Address 275 7th Ave	
New York NY 10001 -	
CITY ▲ STATE ▲ ZIP CODE Name of Bank, Depository, etc.	
Mailing Address	
CITY ▲ STATE ▲ ZIP CODE	

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected Houlahan Victory	I Organization, Affiliated Committee, Joint Fund	Fundraising Representati	ve, or Leadership PAC Spons
Mailing Address	918 Pennsylvania Ave SE		
	Westings		20002
	Washington	DC	20003
Relationship:	CITY A	STATE A	XIP CODE ▲
Full Name			
Mailing Address	CITY	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	CITY A	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION	pries: List all banks or other depositories in	Telephone Number	
TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	pries: List all banks or other depositories in	Telephone Number	
TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	pries: List all banks or other depositories in	Telephone Number	

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	3		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected Fab Four PAC	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
l ab r our r AC			
Mailing Address	231 N 33rd St		
Mailing Address	Ste 406		
	Philadelphia	, PA ,	19106
Dolotionohim			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee July July July July July States (phone number – optional)	oint Fundraising Represent	ative Leadership PAC S
			Leadership PAC S
esignated Agent: Identif			ative Leadership PAC S
esignated Agent: Identif			ative Leadership PAC S
esignated Agent: Identif			Leadership PAC S
esignated Agent: Identif	fy by name, address (phone number – optional)		
esignated Agent: Identif Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or m ame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundrais i	3		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spor
Service First Wo	men's Victory Fund		
	PO Box 9		
Mailing Address			
	Lexington	KY	40588
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC S
	Affiliated Committee Join Join ify by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC S
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC S
esignated Agent: Ident	ify by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC S
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)	STATE	
esignated Agent: Ident	ify by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or necessity.	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION The property of the property deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION The property of the property deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). Joint Fundraisin ç	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
	Democracy Defendant	aers 		
	Mailing Address	600 Pennsylvania Ave SE		
		#15180		
		Washington	DC	20003
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name			7ID CODE 4
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		
	Full Name Mailing Address TITLE OR POSITION	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1		FEC ID number	С
3.		FEC ID number	С
		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected LCA Victory Fund	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	122 C St NW		
	Ste 360		
	Washington	DC	20001
	CITY d Organization Affiliated Committee y Jo y by name, address (phone number – optional)	STATE ▲	ZIP CODE ▲ ative Leadership PAC Sp
Connected Pesignated Agent: Identify Full Name	d Organization Affiliated Committee		
Connected Connected Connected Connected Connected	d Organization Affiliated Committee		
Connected Pesignated Agent: Identify Full Name	Affiliated Committee Affiliated Committee	oint Fundraising Representation	Leadership PAC Sp
Connected Designated Agent: Identify Full Name	Affiliated Committee Affiliated Committee		

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	С
	4		FEC ID number	C
6.	Name of Any Connected MCA Victory Fund	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	600 Pennsylvania Ave SE		
		#15180		
		Washington	DC DC	20003
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	1 Organization Affiliated Committee X Joint F	undraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	phone Number	- -
			priorio realizor	
9.	Name of Bank,	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
9.	Name of Bank,	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which th		s funds, holds accounts, rents