FEC FORM 1	STATEMEN ORGANIZ	Offic	PAGE 1 / 5	
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
]
ADDRESS (number and street)	PO BOX 51			
(Check if address is changed)				
is changed)	ALEXANDRIA		VA 22313 STATE ▲	
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)	tim@kochandhoos.con			
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE AI	DDRESS (URL)			
2. DATE 05 /	D8 / Y Y Y Y 2018			
3. FEC IDENTIFICATION N	NUMBER ► C C	00497305		
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 c	omplete.
Type or Print Name of Treasur	er MEIER, J.THOMAS, , ,			
Signature of Treasurer ME	IER, J.THOMAS, , ,	[Electronically Filed]	Date 05	09 / Y Y Y Y 09 2018
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing t ON SHOULD BE REPORTED W		enalties of 2 U.S.C. §437g.
Office Use Only		For further information constrained for the formation of	on r	EC FORM 1 (Revised 06/2012)

05/09/2018 08 : 36

_		_
FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE OF C		
Candidate	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. (Cor information below.)	nplete the candidate
Name of Candidate		
Candidate Party Affiliat	on Office Sought: House Senate President	State
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	nmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Par
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	egregated fund or par
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	Iraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Corr	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

YOPAC

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

	W., , ,	
Mailing Address	P.O. BOX 26742	
	OVERLAND PARK	KS 66225
	CITY	STATE ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising	g 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.

MEIER, J.	THOMAS, , ,
Full Name	
Mailing Address	5631 ABERDEEN RD
Mailing Address	
	FAIRWAY KS 66205 - - -
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number

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	_MEIER, J.THOMAS, , ,
Mailing Address	5631 ABERDEEN RD
	FAIRWAY KS 66205 Image: State of the sta
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 913 - 486 8242

Full Name of Designated KOCH, T Agent	IMOTHY, A., ,
Mailing Address	901 N WASHINGTON ST, SUITE 700
	ALEXANDRIA
	CITY STATE ZIP CODE
Title or Position	Telephone number 703 299 8571

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.

Mailing Address	6305 W 135TH ST											
		KS 66215										
	CITY	STATE	ZIP CODE									
Name of Bank, [Name of Bank, Depository, etc.											
Mailing Address												
inaling radioco												
		VA 22314										
	CITY	STATE	ZIP CODE									

FFC	Form	1 S	(Revised	02/2017)
	1 01111	10	(11001300	02/2017)

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

5(g) or (h).	Joint	Fundraising	Participant:

1. [FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4.	FEC ID number	С

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

Mailing Address	901 N WASHINGTON ST SUITE 700			
			VA 223	314
Relationship:	CITY 🔺		STATE A	ZIP CODE
Connected	Organization Affiliated Committee	× Joint Fundraising	Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																														
Mailing Address	L																													
	L																													
	L																											- [
TITLE OR POSITION	▼								C	ידוכ	Y								S	TAT	Έź				ZIF	C C	OD	E		
											Te	elep	hoi	ne	Nur	nbe	ər			- [- [

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.																															
Mailing Address	L																														
	L																														
		CITY A													STATE A							ZIP CODE									