PAGE 1 / 12 -

FEC FORM 1				NT OF ATION		Office Hee Only
1. NAME OF			if name	Example: If typing, type	12FE4M5	Office Use Only
COMMITTEE (in	•	is chan	ged)	over the lines.	121 2 1113	
Don Bacon	for Co	ngress				
ADDRESS (number a	nd street)	P.O. Box 391368	3			
(Check if a is changed		<u>.</u>	1 1 1 1			
is changed	1)	Omaha			NE	68139
		CITY A			STATE ▲	ZIP CODE ▲
COMMITTEE'S E-MA	AL ADDRES	S				
(Check if a is changed		FEC@DonJE	Bacon.com			
		Optional Second		dress		
COMMITTEE'S WEB (Check if a is changed	address	RESS (URL) www.donjbacon.	com			
2. DATE 07		2020	Y			
3. FEC IDENTIFIC	CATION NU	MBER ▶	C co	00575167		
4. IS THIS STATEM	MENT	NEW (N)	OR	x AMENDED (A)		
I certify that I have e	examined this	Statement and	to the best	of my knowledge and belief	it is true, correct	and complete.
Type or Print Name of	of Treasurer	Brokke, Scott, A	ılan, ,			
Signature of Treasure	er <i>Brokke</i> ,	Scott, Alan, ,		[Electronically Filed]	Date 07	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of				may subject the person signing ON SHOULD BE REPORTED		the penalties of 2 U.S.C. §437g.
Office Use Only				For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC	Form 1 (Revised 02/2009)	Page 2
	F COMMITTEE	
	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.)	mplete the candidate
Name of Candidat	Bacon, Donald, John, Mr.,	
Candidat Party Aff	DED Times	State NE District 02
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidat	e [
Party (Committee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party.
Politica	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s 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.)	
Joint F	undraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the 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.	
C	committees Participating in Joint Fundraiser	
1	. FEC ID number	
2	. FEC ID number	
3	.	
4	.	

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Name	е	
Don Bacon for	Congress	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
BACON VICTORY FU	IND	
Mailing Address	228 S. WASHINGTON ST.	
Ü	STE. 115 ALEXANDRIA CITY STATE	ZIP CODE
Relationship: Connected		adership PAC Sponsor
Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position of the person in po	ssession of committee
Lisker, Lis	a,,,	
Mailing Address	228 S. Washington St.	
	Ste. 115	
	Alexandria VA 22314	
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer		549 7705
. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	ame and address of
Full Name Brokke, So of Treasurer	cott, Alan, ,	
Mailing Address	1910 S. 72nd Street	
	Suite 200	
	Omaha NE 68124	
Title or Position Treasurer	CITY STATE Telephone number 402	ZIP CODE 341

FEC Form	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Lisker, Lisa, , ,	
Mailing Address	228 S. Washington St.	
	Ste. 115	
	Alexandria VA 22314	
T0 5 0	CITY STATE ZIP (CODE
Title or Position Assistant Treasu	rer Telephone number 703 - 549	7705
	Depositories: List all banks or other depositories in which the committee deposits funds, holds acc xes or maintains funds.	ounts, rents
Name of Bank, D	Depository, etc.	
	SAC Federal Credit Union	I
Mailing Address	7148 Towne Center Parkway	
	Papillion NE 68046	
	CITY STATE ZIP	CODE
Name of Bank, D	Depository, etc.	
	EagleBank	1
Mailing Address	2001 K St NW	
Mailing Address		
	Washington DC 1 20006	
	CITY STATE ZIP	CODE

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

FEC Form 1S (Revised 02/2017)

	g Participant:		
or(h). Joint Fundraisin o	,	FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
PROTECT THE H			
Mailing Address	PO BOX 30844		
	BETHESDA		20824
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identify	by name, address (phone number - optional)		
Full Name			
Mailing Address			
Mailing Address			
Mailing Address			
Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	CITY A		ZIP CODE A
Banks or Other Depositor safety deposit boxes or ma	ies: List all banks or other depositories in wh	STATE ▲ Telephone Number	
Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ies: List all banks or other depositories in wh	STATE ▲ Telephone Number	
Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in whintains funds.	STATE ▲ Telephone Number	
Banks or Other Depositor safety deposit boxes or matching boxes. BB&T Depository, etc.	ries: List all banks or other depositories in whintains funds.	STATE ▲ Telephone Number	

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

FEC Form 1S (Revised 02/2017)

Page _6_ **of** _12__

g) or (h). Joint Fundraisin	g Participant:		
,, ,, 1. , , , , , , , , , , , , , , , , , ,	~ .	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
4.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ındraising Representativ	e, or Leadership PAC Sponsor
TAKE BACK THE	HOUSE 2020		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824-0844
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Sponsor
Full Name	by name, address (phone number – optiona)	
Mailing Address			
	1		
			I I-I
TITLE OR POSITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in what intains funds. Fargo Bank 7901 Wisconsin Avenue	nich the committee deposit	es funds, holds accounts, rents
	Bethesda	MD	20814
	CITY A	STATE A	ZIP CODE ▲

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

1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	С
4.			FEC ID number	С
ame of Any Connected	Organization, Affiliated	Committee, Joint Fun	draising Representati	ve, or Leadership PAC Spons
PATRIOT DAY 1	2020			
	000 0 144 0 144 0 704			
Mailing Address	228 S. WASHINGTON	51.		
	STE. 115			
			, , , , , VA ,	22314
	ALEXANDRIA			
Relationship:		CITY ▲ ed Committee	STATE A	
Connected		ed Committee X Jo		
Connected esignated Agent: Identify	d Organization Affiliate	ed Committee X Jo		
esignated Agent: Identify Full Name	d Organization Affiliate	ed Committee X Jo		
esignated Agent: Identify Full Name	d Organization Affiliate Affiliate by name, address (phon	ed Committee X Jo		Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	d Organization Affiliate by name, address (phon	ed Committee	int Fundraising Represer	Leadership PAC Sp
esignated Agent: Identify Full Name	d Organization Affiliate by name, address (phon	ed Committee		Leadership PAC Sp

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

afety deposit boxes or material deposit boxes or deposit box	1				
afety deposit boxes or ma					
anks or Other Deposito	ries: List all banks aintains funds.	s or other depositories in	which the comm	ittee deposi	ts funds, holds accounts, ren
			Telephone N	lumber	
TITLE OR POSITION	▼	CITY A		STATE A	ZIP CODE ▲
Mailing Address					
Full Name					
	d Organization	Affiliated Committee	Joint Fundraisin	g Represent	ative Leadership PAC Sp
Relationship:	-	CITY ▲	7	STATE ▲	ZIP CODE ▲
	BETHESDA			MD	20824
Mailing Address	PO BOX 30844				
ame of Any Connected GT FARM TEAM	Organization, Aff	filiated Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spon
4			FEC I	D Humber	C
3.				D number D number	C
2.				D number	C
				D number	C

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

h). Joint Fundraisi	•		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
Problem Solvers	Patriots		
Mailing Address	824 S. Milledge Ave.		
, and the second	Ste. 101		
	Athens	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	tive Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		E Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Trundraising Representation of the state of	Leadership PAC Sp
esignated Agent: Identii Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Te	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) for Lines 5(g) or (h), 6,

TITLE OR POSITION	▼ ories: List all banks	CITY or other depositories in which	STATE Telephone Number	ZIP CODE ZIP CODE ts funds, holds accounts, rent
TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	▼ ories: List all banks	CITY A	STATE Telephone Number	ZIP CODE A
TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	▼ ories: List all banks	CITY A	STATE Telephone Number	ZIP CODE A
TITLE OR POSITION	▼ ories: List all banks	CITY A	STATE Telephone Number	ZIP CODE A
			STATE ▲	
			STATE ▲	
Maining / Idalocc				
Mailing Address				
Mailing Madrood				
Mailing Address				
Full Name	y by name, address	(phone number – optional)		
			int Fundraising Represent	ative Leadership PAC Sp
Relationship:		CITY ▲	STATE ▲	ZIP CODE ▲
Deletionship	WASHINGTON	OTTV	DC	20003
	#405			20000
Mailing Address				
	499 S CAPITOL S	STREET SW		
<u> </u>				
lame of Any Connected HOT ROD HAPP	_	iated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
4.				
4.			FEC ID number	C
J			FEC ID number	C
3.			FEC ID number	C
1			FEC ID number	C

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

h). Joint Fundraising				FE	C ID number	C	
1.				J			
2.				J	C ID number	=	
3.] FE	C ID number	С	
4				J FE	C ID number	C	
ame of Any Connected (_	ated Committe	ee, Joint Fu	ndraising	Representati	ve, or Le	eadership PAC Spo
American Patriots	Fund 						
Mailing Address	824 S Milledge A	ve					
	Ste. 101						
	Athens		1 1 1 1	1 1 1	GA	30	0605
Relationship:		CITY A			STATE 4		ZIP CODE ▲
Connected		Affiliated Comm			aising Represer	ntative	Leadership PAC S
					aising Represer	ntative	Leadership PAC S
Connected esignated Agent: Identify					aising Represer	ntative	Leadership PAC S
esignated Agent: Identify Full Name					aising Represer	ntative	Leadership PAC S
esignated Agent: Identify Full Name		(phone numbe	er – optional				Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address	(phone numbe	er – optional				
esignated Agent: Identify Full Name	by name, address	(phone number	er – optional				
esignated Agent: Identify Full Name Mailing Address	by name, address	(phone number	er – optional	Telephor	STATE Anne Number		ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoriatety deposit boxes or mainagement of Bank,	by name, address	(phone number	er – optional	Telephor	STATE Anne Number		ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoriatety deposit boxes or main arme of Bank, epository, etc.	by name, address	(phone number	er – optional	Telephor	STATE Anne Number		ZIP CODE A

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

n). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spor
PROBLEM SOLV	/ER REPUBLICANS		
Martine Address	824 S MILLEDGE AVE STE 101		
Mailing Address			
	17.17.10		20005
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi			Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Full Name Mailing Address	fy by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which	STATE A	ZIP CODE A