09/10/2020 08:31

**FEC** 

Only

# STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. JONI FOR IOWA PO BOX 93441 ADDRESS (number and street) (Check if address is changed) **DES MOINES** 50393 IΑ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS COMPLIANCE@RIGHTSIDECOMPLIANCE.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00546788 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. HOBBS, CABELL, , , Type or Print Name of Treasurer HOBBS, CABELL, , , [Electronically Filed] 09 10 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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

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		rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE  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. (Cominformation below.)	nplete the candidate
Nam Cand	e of didate	ERNST, JONI, , ,	
	didate y Affiliati	on REP Office Sought: House X Senate President	State IA District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:
		Corporation Wo 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 secommittee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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ZIP CODE
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	<b>1</b> (Revised 02/2009)	Page <b>4</b>
Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit book Name of Bank, D	Depositories: List all banks or other depositories in which the committee deposits funds, hold exes or maintains funds.  Depository, etc.  BANK OF AMERICA	
safety deposit box	Depository, etc.  BANK OF AMERICA	1 1 1 1 1 1 1
safety deposit box	oxes or maintains funds.  Depository, etc.	
safety deposit box Name of Bank, D	Depository, etc.  BANK OF AMERICA	
safety deposit box Name of Bank, D	Depository, etc.  BANK OF AMERICA	
safety deposit box Name of Bank, D	Depository, etc.  BANK OF AMERICA  600 N WASHINGTON ST	ZIP CODE
safety deposit box Name of Bank, D	Depository, etc.  BANK OF AMERICA  600 N WASHINGTON ST  ALEXANDRIA  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D Mailing Address	Depository, etc.  BANK OF AMERICA  600 N WASHINGTON ST  ALEXANDRIA  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address  Name of Bank, D	Depository, etc.  BANK OF AMERICA  600 N WASHINGTON ST  ALEXANDRIA  CITY  STATE  Depository, etc.	ZIP CODE
safety deposit box Name of Bank, D Mailing Address	Depository, etc.  BANK OF AMERICA  600 N WASHINGTON ST  ALEXANDRIA  CITY  STATE  CADENCE BANK	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address  Name of Bank, D	Depository, etc.  BANK OF AMERICA  600 N WASHINGTON ST  ALEXANDRIA  CITY  STATE  Depository, etc.  CADENCE BANK  2234 W BROAD ST	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address  Name of Bank, D	Depository, etc.  BANK OF AMERICA  600 N WASHINGTON ST  ALEXANDRIA  CITY  STATE  CADENCE BANK	ZIP CODE

FEC Form 1S (Revised 02/2017)

Page \_5 **of** \_18\_\_

or(h). <b>Joint Fundraisi</b> r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		」 │ FEC ID number	C
ı		」	С
4			
Name of Any Connected	Organization, Affiliated Committee, Joint Fo	undraising Representativ	e, or Leadership PAC Sponsor
DEFEND THE SE	_	<b>.</b>	
Mailing Address	228 S WASHINGTON ST STE 115		
	1		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Sponsor
Full Name			1 1 1 1 1 1 1 1 1 1 1
Mailing Address			
	1		
			I I-I
TITLE OR POSITION	CITY ▲	STATE ▲	ZIP CODE ▲
	·	Telephone Number	-   -
	ories: List all banks or other depositories in wh	nich the committee deposit	s funds, holds accounts, rents
Banks or Other Depositor safety deposit boxes or m		nich the committee deposit	s funds, holds accounts, rents
safety deposit boxes or m  Name of Bank, CHAIN		nich the committee deposit	es funds, holds accounts, rents
Name of Bank, Depository, etc.	aintains funds.	nich the committee deposit	s funds, holds accounts, rents
safety deposit boxes or m  Name of Bank, CHAIN	aintains funds.  N BRIDGE BANK	nich the committee deposit	s funds, holds accounts, rents
Name of Bank, Depository, etc.	aintains funds.  N BRIDGE BANK  1445-A LAUGHLIN AVE		
Name of Bank, Depository, etc.	aintains funds.  N BRIDGE BANK	nich the committee deposit	is funds, holds accounts, rents    22101

FEC Form 1S (Revised 02/2017)

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

h). <b>Joint Fundraisir</b>	ig Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected ERNST MAJORI	Organization, Affiliated Committee, Joint Full FY COMMITTEE	ndraising Representativ	e, or Leadership PAC Spon
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Sp
	y by name, address (phone number – optional)		ative Leadership PAC Sp
esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
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esignated Agent: Identif	y by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)		
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y 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 afety deposit boxes or m  ame of Bank, TRUIS	y 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 afety deposit boxes or m  ame of Bank, TRUIS	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in while aintains funds.  CITY BB&T)	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in while aintains funds.  CITY BB&T)	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(a)	or(h). <b>Joint Fundraising</b>	n Participant:		
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	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
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6.		Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
	ERNST VICTORY			
	Mailing Address	PO BOX 93441		
		1		
		DES MOINES	I IA	50393
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected		t Fundraising Representa	
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		1	1 1 . 1	1
		_ CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	•		
			elephone Number	
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	safety deposit boxes or mai	ies: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	safety deposit boxes or mai		the committee deposit	s funds, holds accounts, rents
	safety deposit boxes or mai		the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.		the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.		the committee deposit	s funds, holds accounts, rents

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

h). <b>Joint Fundraisi</b>			
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 Fundr	aising Representative	e, or Leadership PAC Spon
ERNST VICTOR	Y IOWA		
Mailing Address	PO BOX 93441		
	DES MOINES	IA I	50393
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
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FEC Form 1S (Revised 02/2017)

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

h). <b>Joint Fundraisi</b>	1	FFC ID number	С
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ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
ERNST VICTOR	Y TEAM IOWA		
Mailing Address	PO BOX 93441		
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	DES MOINES	IA I	50393
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
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Connecte		Fundraising Representa	ative Leadership PAC S
Connecto	Affiliated Committee Joint  fy by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
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esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification of Sanks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
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3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spon
GOP WINNING V	VOMEN		
Mailing Address	228 S WASHINGTON ST STE 115		
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	ALEXANDRIA	, VA I	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee X Jory by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
		oint Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identif	y by name, address (phone number – optional)	STATE	Leadership PAC Spanish
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identification  Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A  s funds, holds accounts, ren
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   pries: List all banks or other depositories in which aintains funds.	STATE A  Telephone Number	ZIP CODE A  s funds, holds accounts, ren

FEC Form 1S (Revised 02/2017)

5(a)	or(h). <b>Joint Fundraisin</b>	g Participant:		
<b>(9)</b>	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4.		1 LO 1D Hamber	<u> </u>
6.	Name of Any Connected GREAT IOWA FU	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 341027		
		AUSTIN	TX	78734
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE ▲
	TITLE OR POSITION	•	STATE ▲	ZIP CODE A
9.		Tes: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or matching Mame of Bank, Depository, etc.	Tes: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	Tes: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or matching Mame of Bank, Depository, etc.	Tes: List all banks or other depositories in which	elephone Number	

FEC Form 1S (Revised 02/2017)

5(g) d	or(h). <b>Joint Fundraisin</b>	g Participant:		
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	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected HOLD THE LINE 2	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	TIGES THE LINE 2			
	Mailing Address	228 S WASHINGTON STREET STE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint I	Fundraising Representa	ative Leadership PAC Sponsor
3.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
3.		by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	CITY	STATE A	ZIP CODE A
3.	Full Name	CITY A		
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank,	CITY A  Tele  ries: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
3.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mathematical mathematical deposition of the position of the po	CITY A  Tele  ries: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
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JONI'S ROAST AND R  Mailing Address  PO  Relationship:  Connected Organ	BOX 93441 S MOINES CITY A		IA 50	adership PAC Sponson  2393  ZIP CODE   Leadership PAC Spon
Mailing Address  DE Relationship:  Connected Organ  Designated Agent: Identify by na	BOX 93441  S MOINES  CITY   ization  Affiliated Committee	STA	ATE A	ZIP CODE 🛦
Mailing Address  DE  Relationship:  Connected Organ  Designated Agent: Identify by na	S MOINES  CITY   ization	STA	ATE A	ZIP CODE 🛦
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Connected Organ  Designated Agent: Identify by na	ization Affiliated Committee			-
Designated Agent: Identify by na		Joint Fundraising Rep	resentative	Leadership PAC Spon
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Mailing Address				
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safety deposit boxes or maintains  Name of Bank,	iunus.			
Depository, etc.				
Mailing Address				

FEC Form 1S (Revised 02/2017)

n). <b>Joint Fundraisi</b>	ng Participant:		
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ame of Any Connected	d Organization, Affiliated Committee, Joint Fo	undraising Representativ	e, or Leadership PAC Spon
SENATE FIREW	ALL COMMITTEE III		
	OOA NAWACHINICTON CT. CTF. 700		
Mailing Address	901 N WASHINGTON ST, STE 700		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	ify by name, address (phone number - optiona	1)	
Full Name	ify by name, address (phone number – optiona	<b>)</b>	
	ify by name, address (phone number – optiona	<b>)</b>	
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FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisi</b> n	g Participant:		
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Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponsor
	ITY FIREWALL 2020		
Mailing Address	824 S MILLEDGE AVE STE 101		
	I		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		nt Fundraising Representa	
Full Name			
Mailing Address			
		1 1 . 1	1
TITLE OF POSITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	1	Telephone Number	-   -
		releptione Number	
Banks or Other Deposito	ries: List all banks or other depositories in which	h the committee deposit	s funds, holds accounts, rents
safety deposit boxes or ma	untains funds.		
Name of Bank, Depository, etc.			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisi</b> r	g Participant:		
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lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
THE FOUNDERS	COMMITTEE		
Mailing Address	1305 W 11TH ST #213		
	HOUSTON	TX	77008
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Join  y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
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Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (phone number – optional)  CITY   Tries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundral	ising Representative	, or Leadership PAC Sponsor
	THE VICTORY CI	_UB		
	Mailing Address	PO BOX 60148		
		1		
		WASHINGTON	l DC	20039
	Relationship:	CITY ▲	STATE A	ZIP CODE A
	Connected		- Fundraising Representa	
3.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			1
	Mailing Address	1		
	ag / taaeee			
				1
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE ▲
	TITLE OR POSITION	<b>Y</b>		
	TITLE OR POSITION	<b>Y</b>	STATE ▲	
9.	Banks or Other Depositor	Tele	STATE A	ZIP CODE A
<b>)</b> .	Banks or Other Depositor safety deposit boxes or ma	Tele	STATE A	ZIP CODE A
).	Banks or Other Depositor	Tele	STATE A	ZIP CODE A
).	Banks or Other Depositor safety deposit boxes or ma	Tele	STATE A	ZIP CODE A
<b>)</b> .	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	Tele	STATE A	ZIP CODE A
<b>)</b> .	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	Tele	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>		FEC ID number	С
		FEC ID number	C
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TILLIS-ERNST V			
	DO DOV GEOTE		
Mailing Address	PO BOX 97275		
	RALEIGH	NC NC	27624
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A