Image# 202004159216866667		04/15/2020 14 : 29		
FEC FORM 1	STATEME ORGANIZ			PAGE 1 / 11
			Office	e Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Don Bacon for C				
ADDRESS (number and street)	P.O. Box 391368			
<ul> <li>(Check if address is changed)</li> </ul>				
	Omaha		NE 68139	
	CITY A		STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)	FEC@DonJBacon.com	n 		
	Optional Second E-Mail Ad	ldress		1
COMMITTEE'S WEB PAGE A	DDRESS (URL)			
<ul><li>(Check if address is changed)</li></ul>	www.donjbacon.com			
2. DATE 04	15 <sup>7</sup> Y Y Y Y 2020			
3. FEC IDENTIFICATION N		00575167		
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 co	omplete.
Type or Print Name of Treasur	rer Brokke, Scott, Alan, ,			
Signature of Treasurer	kke, Scott, Alan, ,	[Electronically Filed]	Date 04	D D / Y Y Y Y 15 2020
NOTE: Submission of false, erro		may subject the person signing t ION SHOULD BE REPORTED W		nalties of 2 U.S.C. §437g.
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	n <b>F</b>	EC FORM 1 Revised 06/2012)

04/15/2020 14 : 29

	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	
Can	ndidate	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
Nam Cano	ie of didate	Bacon, Donald, John, Mr.,	
	didate y Affiliati	on REP Office Sought: X House Senate President	State NE District 02
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	ie 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 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)	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	it 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 the committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number	
	3.		
	4.	I       I	

I

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

## Don Bacon for Congress

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

BACON VICTORY FU	ND 			
Mailing Address	228 S. WASHINGTON ST.			
	STE. 115			
		VA	22314	
		STATE	ZIP CODE	
Relationship: Connected	Organization Affiliated Committee	Joint Fundraising	Representativ	e 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.

Lisker, Lisa	à, , ,
Full Name	
Mailing Address	228 S. Washington St.
	Ste. 115
	Alexandria         VA         22314
Title or Position	CITY STATE ZIP CODE
Assistant Treasurer	Telephone number     703     549     7705

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	Brokke, Scott, Alan, ,
Mailing Address	1910 S. 72nd Street
	Suite 200
	Omaha
	CITY STATE ZIP CODE
Title or Position Treasurer	402      341    9441

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Lisker, Lisa, , ,	
Mailing Address	228 S. Washington St.	
	Ste. 115	
	Alexandria       VA       22314         Image: Second state       Image: Second state       Image: Second state	
	CITY STATE ZIP CODE	
Title or Position	rer Telephone number 703 549 7705	

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.

	SAC Federal Credit Union		
Mailing Address	7148 Towne Center Parkway		
	Papillion	NE 6804	16 
	CITY	STATE	ZIP CODE
Name of Bank, D	epository, etc.		
	EagleBank		
Mailing Address	2001 K St NW		
	Washington		06 
	CITY	STATE	ZIP CODE

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

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 PROTECT THE HOUSE

Mailing Address	PO BOX 30844				
	BETHESDA			MD 2082	24
Relationship:		CITY A		STATE 🔺	ZIP CODE
Connected	Organization Affilia	ted Committee	Joint Fundraising	Representative	Leadership PAC Sponsor

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

Full Name																												J
Mailing Address	L																											
	L																											
	L																				L					- [		
TITLE OR POSITION	TITLE OR POSITION ▼ CITY ▲										S	TAT	E				ZIF	C	DC	E								
										lep	hor	ne I	Nur	nbe	ər			 - L				- [		]				

Name of Bank, BB&T Depository, etc.			
Mailing Address	1909 K Street NW		
	Washington		20006
	CITY A	STATE A	ZIP CODE

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

i

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

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

Mailing Address	PO BOX 30844				
-					
	BETHESDA			MD 208	24-0844
Relationship:		CITY A		STATE 🔺	ZIP CODE
Connected 0	Organization Affilia	ted Committee	× Joint Fundraising	Representative	Leadership PAC Sponsor

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

Full Name																													J
Mailing Address	L																												
	L																												
	L																					L					- [		
TITLE OR POSITION V															S	TAT	E				ZIF	C	DC	E					
	Telephor													ne I	Nur	nbe	ər			 - L				- [		]			

Name of Bank, Wells F Depository, etc.	argo Bank		
Mailing Address	7901 Wisconsin Avenue		
	Bethesda	MD	20814
	CITY 🔺	STATE A	ZIP CODE

<sup>6.</sup> Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor TAKE BACK THE HOUSE 2020

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

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

1. <u> </u>	FEC ID number	
2.	FEC ID number	
3	FEC ID number	
4	FEC ID number	

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor PATRIOT DAY 1 2020

Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
		VA 2	22314
Relationship:		STATE A	ZIP CODE
Connected	Organization Affiliated Committee	X Joint Fundraising Representative	Leadership PAC Sponsor

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

Full Name																															J
Mailing Address																															
													1																		
																												- [_			
TITLE OR POSITION V CITY															S	TAT	E				ZIP	C	DDI	E 🔺							
	Telepi												hor	ne I	Nur	nbe	er			- L				- [							

Name of Bank, Cadeno Depository, etc.	<b>ce Bank</b>		
Mailing Address	2234 W. Broad St.		
	Athens	GA 30606	
	CITY 🔺	STATE ▲ ZIP CODE ▲	I

FFC	Form	<b>1</b> S	(Revised	02/2017)
I LO	1 01111	10	(LIEVISEU	02/2017)

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

2.     FEC ID number     C       3.     FEC ID number     C	1	FEC ID number	С
3.	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 GT FARM TEAM

1				
Mailing Address	PO BOX 30844			
			MD	20824
Relationship:	CITY 🔺		STATE A	ZIP CODE
Connected 0	Drganization Affiliated Commi	e 🗴 Joint Fund	raising Representative	Leadership PAC Sponsor

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

Full Name																											
Mailing Address	L																										
	L								1	1																	
																									-		
TITLE OR POSITION	▼					C	ידוכ	Y								S	TAT	E				ZIP	C	DD	E 🔺		
												Te	lep	hor	ne	Nur	nbe	ər			· L				- [		

Name of Bank, Depository, etc.																							
Mailing Address	L																						
	L																						
	L															L					. [		
					C	۲I	( 🔺					S	TA	E.				ZIP	C	DD	E		

FEC	Form	1S	(Revised	02/2017)
			(11001000	02/2011/

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

1	FEC ID number	С
2.	FEC ID number	C
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 Problem Solvers Patriots

Mailing Address	824 S. Milledge Ave.			
	Ste. 101			
	Athens		GA	30605
Relationship:		CITY 🔺	STATE A	ZIP CODE
Connected	Organization Affiliat	ed Committee	Joint Fundraising Representative	e Leadership PAC Sponsor

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

Full Name				
Mailing Address				
TITLE OR POSITION	•	CITY A	STATE A	ZIP CODE
		Telep	hone Number	

Name of Bank, Depository, etc.																							
Mailing Address	L																						
	L																						
	L															L					. [		
					C	۲I	( 🔺					S	TA	E.				ZIP	C	DD	E		

FEC	Form	1S	(Revised	02/2017)
			(11001000	00,0017

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 HOT ROD HAPPY HOUR

Mailing Address	499 S CAPITOL STREET SW			
	#405			
			DC 2000	03 
Relationship:	CITY 🔺		STATE A	ZIP CODE
Connected 0	Organization Affiliated Committe	X Joint Fundraising	g Representative	Leadership PAC Sponsor

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

Full Name																																
Mailing Address	L																															
	l				1																											
	l																							L					- [_			
TITLE OR POSITION	L L L L L L L L L L L L L L L L L L L																		S	TAT	E				ZIP	C	DD	E 🔺				
																Те	lep	hor	ne I	Nur	nbe	er			 - [				- [_			

Name of Bank, Depository, etc.																							
Mailing Address	L																						
	L																						
	L												L			L					- [_		
					C	Π						S	TA	E.				ZIP	' C(	DD	E 🔺	•	

FEC	Form	1S	(Revised	02/2017)
			(11001000	02/2011/

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

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

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

Mailing Address	824 S Milledge Ave			
Mailing Address	Ste. 101			 , , , , , , , , , , , ]
	Athens			30605 
Relationship:		CITY 🔺	STATE A	ZIP CODE
Connected C	Drganization Affiliat	ed Committee	Joint Fundraising Representative	Leadership PAC Sponsor

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

Full Name																										l
Mailing Address	L																									
	L																									
	L																					-	- [_			
TITLE OR POSITION	•				C	CIT	Y							S	TAT	Εı				ZIF	C	OD	E			
										Te	elep	hor	ne I	Nur	nbe	ər			 - L				-L			

Name of Bank, Depository, etc.																															
Mailing Address	L																														
	L																														
		CITY 🔺												STATE A						ZIP CODE											