PAGE 1 / 19

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. MCSALLY FOR SENATE INC PO BOX 19128 ADDRESS (number and street) (Check if address is changed) TUCSON 85731 ΑZ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS MARTHAMCSALLY@PDSCOMPLIANCE.COM (Check if address is changed) Optional Second E-Mail Address ADMIN@PDSCOMPLIANCE.COM COMMITTEE'S WEB PAGE ADDRESS (URL) MCSALLYFORSENATE.COM (Check if address is changed) DATE 30 2020 C00666040 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. KILGORE, PAUL, , , Type or Print Name of Treasurer KILGORE, PAUL, , , [Electronically Filed] 10 30 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 Only

Local 202-694-1100

	550 <b>5</b>	4 (7) 1 1 00(0000)	5 0
		rm 1 (Revised 02/2009)	Page 2
		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. (Cor information below.)	mplete the candidate
Nam Cand	e of didate	MCSALLY, MARTHA, , ,	
	didate y Affiliati	on REP Office Sought: House X Senate President	State AZ District 00
(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 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

	FEC <b>Form 1</b> (Re	evised 02/2009)	Page <b>3</b>
Wr	ite or Type Committee		i ago 💆
		FOR SENATE INC	
		ected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
	CSALLY FOR C		
	SOMELT TORCE		
		PO BOX 19128	
	Mailing Address	PO BOX 19120	
		TUCSON AZ 85731-912  CITY STATE Z	288 
		CITY STATE Z	.IP CODE
	Relationship: Cor	nnected Organization 🗶 Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
	Custodian of Records books and records.	<b>Is:</b> Identify by name, address (phone number optional) and position of the person in poss	ession of committee
	Full Name		
	Mailing Address		
	Title or Position	CITY STATE Z	IP CODE
		Telephone number	
		ame and address (phone number optional) of the treasurer of the committee; and the nam (e.g., assistant treasurer).	e and address of
ı	Full Name KILO	GORE, PAUL, , ,	1
(	of Treasurer	UDDA C MILLEDGE AVE	
ı	Mailing Address	824 S. MILLEDGE AVE.	
		STE. 101	
		ATHENS GA 30605	
-	Title or Position TREASURER		34   7780
4			ľ

FEC <b>Forr</b>	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Goode, Michael, , ,	
Mailing Address	824 S. Milledge Ave. Ste. 101	
	Athens GA 30605	
	CITY STATE ZIP	CODE
Title or Position Asst. Treasurer	Telephone number 706 - 534	
	<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, holds accoxes or maintains funds.	ounts, rents
Name of Bank, I	Depository, etc.	
	WELLS FARGO	
Mailing Address	420 MONTGOMERY STREET	
	SAN FRANCISCO CA 94104	
	CITY STATE ZIP	CODE
Name of Bank, I	Depository, etc.	
	BB&T	
Mailing Address		
	WASHINGTON DC 20006	
	CITY STATE ZIP	CODE

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

h). <b>Joint Fundraisi</b> r	1	FFC ID	C
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
SAVE THE SENA	ATE 2020		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and the control of Bank, CHAIN	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and the control of Bank, CHAIN	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which aintains funds.  N BRIDGE BANK	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions are of Bank, epository, etc	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which aintains funds.  N BRIDGE BANK	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	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected HOLD THE LINE	Organization, Affiliated Committee, Joint Fundraisi	ng Representative	e, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON ST STE 115		
		ALEXANDRIA	VA VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	ndraising Representa	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 ▲
		Telent	Ni	[-] [-] [
		10.00	none Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds.		s funds, holds accounts, rents
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	Name of Bank, Bank of	ries: List all banks or other depositories in which the intains funds.		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.		s funds, holds accounts, rents

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

h). <b>Joint Fundraisi</b>	ig i di ticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
THE FOUNDERS	S COMMITTEE		
Mailing Address	1305 W 11TH ST		
	#213		
	HOUSTON	TX	77008
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC S
Connecte	d Organization Affiliated Committee Joy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC S
Connecte		int Fundraising Represent	Leadership PAC S
esignated Agent: Identification		int Fundraising Represent	Leadership PAC S
Connecte esignated Agent: Identif		int Fundraising Represent	Leadership PAC S
esignated Agent: Identification	y by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC S
esignated Agent: Identification  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 affety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of the content of t	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	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   Ories: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6

n). <b>Joint Fundraising</b>	Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected (	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spor
DEFEND THE SEI	NATE		
Mailing Address	228 S WASHINGTON STREET SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify	Organization Affiliated Committee X June 1985 June 1985 Affiliated Committee X June 1985 June 19		ative Leadership PAC S
esignated Agent: Identify  Full Name			ative Leadership PAC S
esignated Agent: Identify			ative Leadership PAC S
esignated Agent: Identify  Full Name			Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main	by name, address (phone number – optional)  CITY   CITY   es: List all banks or other depositories in white the standard	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositoring the deposition boxes or main arms of Bank, expository, etc.	by name, address (phone number – optional)  CITY   CITY   es: List all banks or other depositories in white the standard	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main	by name, address (phone number – optional)  CITY   CITY   es: List all banks or other depositories in white the standard funds.  Ee Bank	STATE A Telephone Number	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	I Organization, Affiliated Committee, Joint Fund	draising Representative	, or Leadership PAC Spon
MCSALLY VICTO	ORY COMMITTE		
Mailing Address	228 S WASHINGTON STREET SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A  City A  pries: List all banks or other depositories in which	Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A  City A  pries: List all banks or other depositories in which	Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, depository, etc.	CITY A  City A  pries: List all banks or other depositories in which	Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A  City A  pries: List all banks or other depositories in which	Telephone Number	

FEC Form 1S (Revised 02/2017) for Lir

	g Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spor
MCSALLY SENA	TE VICTORY FUND 2020		
Mailing Address	824 S MILLEDGE AVE STE 101		
Mailing Address			
	ATHENS	ı GA ı	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE A
		int Fundraising Representa	
esignated Agent: Identify	y by name, address (phone number – optional)		
esignated Agent: Identify	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name   Mailing Address	CITY A		
Full Name Mailing Address  TITLE OR POSITION	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or maintenance.	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito aftery deposit boxes or maintain and the same of Bank,	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito aftery deposit boxes or maintain and the same of Bank,	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito fety deposit boxes or material deposit boxes or material depository, etc.	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or material deposit boxes or material depository, etc.	CITY A	STATE A Telephone Number	ZIP CODE A

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

Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mailing and boxes or mailing and boxes.  Mailing Address	▼ bries: List all ban	CITY   CITY    ks or other depositories in	Telephone No		ZIP CODE   ZIP CODE   s funds, holds accounts, rents
TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	▼ bries: List all ban	CITY A	Telephone No	ımber	ZIP CODE A
TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	▼ bries: List all ban	CITY A	Telephone No	ımber	ZIP CODE A
				STATE A	
Mailing Address					
Mailing Address					
Mailing Address					
Full Name					
	d Organization y by name, addr	Affiliated Committee	Joint Fundraising	Representa	ative Leadership PAC Sp
Relationship:		CITY A		STATE A	ZIP CODE ▲
	ATHENS			GA	30605
Mailing Address	824 S MILLE	DGE AVE STE 101			
UNITED FOR A L	JS SENATE	MAJORITY			
ame of Any Connected	Organization, A	Affiliated Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spons
4.			FEC ID	number	С
			FEC ID	number	C
3.			FEC ID	number	C

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

h). <b>Joint Fundraisi</b>	ig raiticipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	l Organization, Affiliated Committee, Joint Fundra LEAGUES VICTORY COMMITTEE	aising Representative	e, or Leadership PAC Spon
TILLIO AND COL	LEAGUES VIGTORY CONNINT TEE		
Mailing Address	228 S. WASHINGTON ST.		
Maining Address	STE. 115		
	ALEXANDRIA	ı VA	22314
Deletienskie			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint  fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Sp
		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mail to the control of the contr	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and the second and th	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)

panization, Affiliated Committee, Joint RY  228 S. WASHINGTON ST.  STE. 115  ALEXANDRIA  CITY	FEC ID number	
228 S. WASHINGTON ST.  STE. 115  ALEXANDRIA		ve, or Leadership PAC Spon
STE. 115 ALEXANDRIA		
STE. 115 ALEXANDRIA		
	VA VA	
CITY ▲		22314
ganization Affiliated Committee	STATE A Joint Fundraising Represei	
		ZIP CODE ▲
	Telephone Number	
: List all banks or other depositories in vins funds.	which the committee depos	sits funds, holds accounts, ren
	CITY A	

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

	ng Participant:		
1.		FEC ID numb	per C
2.		FEC ID numb	per C
3.		FEC ID numb	per C
4.		FEC ID numb	per C
	l Organization, Affiliated Committee, Joint	Fundraising Represent	tative, or Leadership PAC Spor
GREAT ARIZON	A FUND		
	<sub>I</sub> PO BOX 341027		
Mailing Address			
	AUSTIN	ΔTΣ	78734
Relationship:	CITY A	STAT	E ▲ ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Joint Fundraising Repre	sentative Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optio	nal)	
Full Name	fy by name, address (phone number – optio	nal)	
	fy by name, address (phone number – optio	nal)	
Full Name	fy by name, address (phone number – optio	nal)	
Full Name			
Full Name	CITY		
Full Name	CITY		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite of the deposite boxes or mainly and the deposite boxes or main	CITY ▲  CITY ▲  pries: List all banks or other depositories in	STATE Telephone Number	▲ ZIP CODE ▲
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank,	CITY ▲  CITY ▲  pries: List all banks or other depositories in	STATE Telephone Number	▲ ZIP CODE ▲
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank,	CITY ▲  CITY ▲  pries: List all banks or other depositories in	STATE Telephone Number	▲ ZIP CODE ▲
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in	STATE Telephone Number	▲ ZIP CODE ▲
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in	STATE Telephone Number	▲ ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

TITLE OR POSITION  Banks or Other Depositor Safety deposit boxes or many Name of Bank, Depository, etc.  Mailing Address	ories: List all banks or		STATE A elephone Number the committee deposit	ZIP CODE   ZIP CODE   s funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or	та	elephone Number	
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or	та	elephone Number	
Banks or Other Deposito safety deposit boxes or ma	ories: List all banks or	та	elephone Number	
Banks or Other Deposito	ories: List all banks or	та	elephone Number	
		та	elephone Number	
TITLE OR POSITION	<b>V</b>			ZIP CODE A
TITLE OR POSITION	<b>↓</b>	CITY A	STATE ▲	ZIP CODE A
Mailing Address				
Full Name				
Designated Agent: Identify				
	d Organization Af		t Fundraising Representa	
Relationship:		CITY A	STATE A	ZIP CODE ▲
	ALEXANDRIA		, VA	22314
Mailing Address	228 S. WASHINGT	UN SI.		
	200 0 2			
Name of Any Connected		ted Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponso
7.			FEC ID number	C
4.			FEC ID number	C
3		1		C
			FEC ID number	

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

TITLE OR POSITION	<b>U</b>	CITY A	STATE A	ZIP CODE 🛦
J				
Ü				
· ·				
Mailing Address				
Full Name				1 1 1 1 1 1 1 1 1 1 1
Designated Agent: Identify	/ by name, address	(phone number – optional)		
Connected	d Organization	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spons
Relationship:		CITY A	STATE A	ZIP CODE ▲
	WASHINGTON		, DC ,	20039
Mailing Address	PO BOX 60148			
THE VICTORY C				
	_	ated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
4.			FEC ID number	C
3			FEC ID number	C
2.			FEC ID number	C
			FEC ID number	C

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

h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
=	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
SENATE FIREW	ALL COMMITTEE III		
	∣ 901 N WASHINGTON ST		
Mailing Address			
	SUITE 700		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or market	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

o(g) or (h). <b>Joint Fundraisir</b>	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
S. Name of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e. or Leadership PAC Sponsor
	ARIZONA VICTORY FUND		,
Mailing Address	824 S MILLEDGE AVE, STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	nt Fundraising Representa	tive Leadership PAC Sponsor
B. Designated Agent: Identification	y by name, address (phone number – optional)		
Mailing Address			
	CITY A	STATE A	
TITLE OR POSITION	V GITT Z	SIAIL	ZIF CODE
	7	Telephone Number	
Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc.  Mailing Address	pries: List all banks or other depositories in which aintains funds.	n the committee deposits	s funds, holds accounts, rents
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fur	draising Representativ	e, or Leadership PAC Sponso
SENATE FIREW	ALL 2020		
Mailing Address	1305 W 11TH ST		
	#213		
	HOUSTON	TX	77008
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif	fy by name address (phone number – ontional)		
Full Name	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name   _   _   _   Mailing Address	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A
Full Name   _   _    Mailing Address  TITLE OR POSITION	CITY ▲  CITY ▲  pries: List all banks or other depositories in which	STATE ▲ Telephone Number	
Full Name Mailing Address  TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank,	CITY ▲  CITY ▲  pries: List all banks or other depositories in which	STATE ▲ Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in which	STATE ▲ Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in which	STATE ▲ Telephone Number	