Only

# STATEMENT OF

PAGE 1 / 17

**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 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 85710 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 06 2019 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] 06 2019 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

FEC	Form 1 (Revised 02/2009)	Page <b>2</b>
	COMMITTEE  te Committee:	
(a) x	This committee is a principal campaign committee. (Complete the candidate information below	.)
(b) Name of	This committee is an authorized committee, and is NOT a principal campaign committee. (Corinformation below.)    MCSALLY, MARTHA, , ,	nplete the candidate
Candidate Candidate Party Affil	Office	State AZ District 00
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	ommittee:  (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party.
Politica	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)	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.)	
Joint Fu	ndraising 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
Co	mmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised	02/2009)	Page <b>3</b>
Write or Type Committee Nam	ne	
MCSALLY FOR	R SENATE INC	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
MCSALLY FOR CON	IGRESS	
Mailing Address	PO BOX 19128	
Mailing Address	TUCSON AZ 85731-9	
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization x Affiliated Committee Joint Fundraising Representative Le	adership PAC Sponsor
. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in pos	ssession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
3. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the na	ame and address of
any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the na	ame and address of
any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	ame and address of
any designated agent (e.g.,  Full Name KILGORE  of Treasurer	nd address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	ame and address of
any designated agent (e.g.,  Full Name KILGORE  of Treasurer	nd address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).  E, PAUL, , ,  824 S. MILLEDGE AVE.  STE. 101  ATHENS  GA 30605	
any designated agent (e.g.,  Full Name KILGORE  of Treasurer	nd address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).  E, PAUL, , ,  824 S. MILLEDGE AVE.  STE. 101  ATHENS  GA 30605  CITY  STATE	me and address of  ZIP CODE  7780

FEC <b>Form</b>	1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent	Goode, Michael, , ,	
Mailing Address	824 S. Milledge Ave. Ste. 101	
	Athens GA CITY STATE	30605 ZIP CODE
Title or Position Asst. Treasurer	Telephone number	706   -   534   -   7780
	Depositories: List all banks or other depositories in which the committee depo es or maintains funds.	sits funds, holds accounts, rents
Name of Bank, De	epository, etc.	
	WELLS FARGO	
Mailing Address	420 MONTGOMERY STREET	
	SAN FRANCISCO CA	94104
	CITY STATE	ZIP CODE
Name of Bank, De	epository, etc.	
L	BB&T 1909 K STREET NW	
Mailing Address		
	WASHINGTON	20006
	CITY STATE	ZIP CODE

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

1.				
			FEC ID number	С
2.			FEC ID number	C
3.			FEC ID number	С
4.			FEC ID number	С
=	Organization, Affiliated Committ	ee, Joint Fundra	nising Representati	ve, or Leadership PAC Spon
DEFEND THE SE	NATE			
	228 S WASHINGTON STREET S	CLUTE 115		
Mailing Address	220 3 WASHINGTON STREETS			
	ALEXANDRIA		VA VA	22314
Relationship:	CITY A		STATE 4	ZIP CODE ▲
	by name, address (phone number	er – optional)		
Full Name				
Mailing Address				
	CITY A		STATE A	ZIP CODE A
Mailing Address	CITY A	Tel	STATE ▲  dephone Number	
Mailing Address  TITLE OR POSITION	CITY A		ephone Number	ZIP CODE A
Mailing Address  TITLE OR POSITION	CITY A		ephone Number	ZIP CODE A
Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail arms of Bank, CHAIN	CITY A		ephone Number	ZIP CODE A
Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or maintain and the companion of Bank, epository, etc.	CITY A		ephone Number	ZIP CODE A
Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail arms of Bank, CHAIN	ries: List all banks or other deposintains funds.		ephone Number	ZIP CODE A
Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or maintain and the companion of Bank, epository, etc.	ries: List all banks or other deposintains funds.		ephone Number	ZIP CODE A

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	C
2.	1		FEC ID number	C
3.			FEC ID number	C
			FEC ID number	C
4.				
6. <b>Name</b>	e of Any Connected C	rganization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
SE	NATE FIREWAL	L 2020		
	Mailing Address	901 N WASHINGTON ST		
	Mailing Address	SUITE 700		
			.,,	00044
		ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	ındraising Representa	ative Leadership PAC Sponsor
8. <b>Desig</b>	nated Agent: Identify	by name, address (phone number – optional)		
	nated Agent: Identify	by name, address (phone number – optional)		
Fu		by name, address (phone number – optional)		
Fu	ull Name	by name, address (phone number – optional)		
Fu	ull Name	by name, address (phone number – optional)		
Fu	ull Name			
Fu	ull Name	CITY A	STATE A	ZIP CODE A
Fu	ull Name	CITY A	STATE A	
Fu	ull Name	CITY A		
Ft M	ailing Address  FITLE OR POSITION   s or Other Depositoric	CITY A  Teleposes: List all banks or other depositories in which the	phone Number	ZIP CODE 🛦
Fu M	ailing Address  FITLE OR POSITION   s or Other Depositoric deposit boxes or main	CITY   CITY   Telepases: List all banks or other depositories in which the stains funds.	phone Number	ZIP CODE 🛦
9. <b>Banks</b> safety	ailing Address  FITLE OR POSITION   s or Other Depositoric	CITY   CITY   Telepases: List all banks or other depositories in which the stains funds.	phone Number	ZIP CODE 🛦
9. <b>Banks</b> safety	lailing Address  FITLE OR POSITION  s or Other Depositoric deposit boxes or main of Bank, UNITED sitory, etc.	CITY   CITY   Telepases: List all banks or other depositories in which the stains funds.	phone Number	ZIP CODE 🛦
9. <b>Banks</b> safety	ailing Address  FITLE OR POSITION   s or Other Depositoric deposit boxes or main of Bank, UNITED	CITY   CITY   Telepase: List all banks or other depositories in which the stains funds.  DBANK	phone Number	ZIP CODE 🛦
9. <b>Banks</b> safety	lailing Address  FITLE OR POSITION  s or Other Depositoric deposit boxes or main of Bank, UNITED sitory, etc.	CITY   CITY   Teleposes: List all banks or other depositories in which the stains funds.  DBANK  PO BOX 393	e committee deposit	ZIP CODE   S funds, holds accounts, rents
9. <b>Banks</b> safety	lailing Address  FITLE OR POSITION  s or Other Depositoric deposit boxes or main of Bank, UNITED sitory, etc.	CITY   CITY   Telepase: List all banks or other depositories in which the stains funds.  DBANK	phone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	ng Participant:		
(0)	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	MCSALLY VICTO	ORY COMMITIE		
		COR C WASHINGTON OTDEET CHITE 445		
	Mailing Address	228 S WASHINGTON STREET SUITE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
				<u> </u>
	TITLE OF POSITION	CITY A	STATE A	ZIP CODE ▲
	TITLE OR POSITION	•	STATE A	
	TITLE OR POSITION	•		
9.		▼ 	STATE A	ZIP CODE ▲
9.		Tes: List all banks or other depositories in which	STATE A	ZIP CODE ▲
9.	Banks or Other Deposito safety deposit boxes or ma	Tes: List all banks or other depositories in which	STATE A	ZIP CODE ▲
9.	Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE ▲
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	pries: List all banks or other depositories in which aintains funds.  Of America	STATE A	ZIP CODE ▲
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	pries: List all banks or other depositories in which aintains funds.  Of America	STATE A	ZIP CODE ▲

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	С
3.		FEC ID number	С
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
MICSALLY SEINA	TE VICTORY FUND 2020		
Mailing Address	824 S MILLEDGE AVE STE 101		
Mailing Address			
	ATHENS		30605
Deleterate	ATHENS	GA L	
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee  Joint fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Hepresent	Leadersnip PAC Sp
esignated Agent: Identi		Fundraising Hepresent	Leadersnip PAC Sp
esignated Agent: Identi		Fundraising Hepresent	Leadersnip PAC Sp
esignated Agent: Identi		Fundraising Hepresent	Leadersnip PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address	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   Te	STATE A	ZIP CODE A
esignated Agent: Identi  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: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	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: 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   Telepries: 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 management and ma	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: Identi  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   Telepries: 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 mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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	C
2			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
		Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
M	lailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	CA	30605
_			GA L	
R	elationship:	CITY ▲	STATE ▲	ZIP CODE ▲
B. <b>Designa</b>	ated Agent: Identify I	by name, address (phone number – optional)		
Full	Name			
Mai	ling Address			
TIT	TLE OR POSITION <b>T</b>	CITY A	STATE ▲	ZIP CODE A
TIT	TLE OR POSITION \	CITY A		
Banks (	or Other Depositoric leposit boxes or main of Bank,	CITY A  T  es: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦
Deposite	or Other Depositoric leposit boxes or main of Bank,	CITY A  T  es: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Deposite	or Other Depositorie deposit boxes or main of Bank, ory, etc.	CITY A  T  es: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(a)	or(h). <b>Joint Fundraisin</b>	g Participant:		
- (3)	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	4.			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e. or Leadership PAC Sponsor
		LEAGUES VICTORY COMMITTEE	3 4	,
	Mailing Address	228 S. WASHINGTON ST.		
	-	STE. 115		
		ALEXANDRIA	ı ı VA ı	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
			t Fundraising Representa	
	Connected	I Organization Affiliated Committee X Joint	r Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
		1		
				1
		CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	1	N I	[_] [_] [
			elephone Number	
9.				
J.	Banks or Other Denositor	ine. List all banks or other depositories in which	the committee denocit	e funde, holde accounte, ronte
	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
			the committee deposit	s funds, holds accounts, rents
	Name of Bank,		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

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b> ç	յ Participant:		
	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4		FEC ID number C	
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint Fund	raising Representative, or Lead	ership PAC Sponsor
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
		ALEXANDRIA	VA 2231	4
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Join	Fundraising Representative	Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
	Mailing Address			
		CITY ▲	STATE ▲	ZIP CODE A
	TITLE OR POSITION	<b>*</b>		1.1
		<u>                                     </u>	elephone Number	
9.	safety deposit boxes or mai	<b>ies:</b> List all banks or other depositories in which ntains funds.	the committee deposits funds, he	olds accounts, rents
	Depository, etc.			
	Mailing Address			
		CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng 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 Funda	raising Representative	e, or Leadership PAC Spon
WHITEFISH VIC	TORY		
	OCC O WASHINGTON OT		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identing Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identing Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identing Full Name     Mailing Address	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
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 marked to the content of	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: Identii  Full Name	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 management and ame of Bank,	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 mane of Bank, epository, etc.	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 mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

GREAT ARIZONA FUND  Mailing Address  PO BOX 341027  AUSTIN  TX  78734  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  ✓ Joint Fundraising Representative  Leadership PAC S						
AUSTIN  Relationship:  CITY A  STATE A  ZIP CODE A  Besignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  STATE A  ZIP CODE A  ZIP CODE A  STATE A  ZIP CODE A  ZIP CODE A	6.			ising Representative	e, or Leadership PAC Sponsor	
AUSTIN  Relationship:  CITY A  STATE A  ZIP CODE A  Connected Organization  Affiliated Committee  Affiliated C						
AUSTIN  Relationship:  CITY A  STATE A  ZIP CODE A  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC S  Building Address  CITY A  STATE A  ZIP CODE A		Mailing Address	PO BOX 341027			
Relationship:  CITY A STATE A ZIP CODE A  Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC S  8. Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY A STATE A ZIP CODE A		-				
Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC S  8. Designated Agent: Identify by name, address (phone number – optional)  Full Name Mailing Address			AUSTIN	, TX	78734	
Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC S  8. Designated Agent: Identify by name, address (phone number – optional)  Full Name Mailing Address		Relationship:	CITY ▲	STATE A	ZIP CODE ▲	
8. Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY A STATE A ZIP CODE A						or
Full Name  Mailing Address  CITY A STATE A ZIP CODE A			o organization	Triditalising Tiepresenia	Louderdrip 1710 Opone	
Mailing Address  CITY A STATE A ZIP CODE A						
Mailing Address  CITY A STATE A ZIP CODE A	8.	Designated Agent: Identif	fy by name, address (phone number - optional)			
CITY A STATE A ZIP CODE A	8.		fy by name, address (phone number – optional)			
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	8.	Full Name	fy by name, address (phone number – optional)			
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	8.	Full Name	fy by name, address (phone number – optional)			
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	8.	Full Name	fy by name, address (phone number – optional)			
	8.	Full Name				
Telephone Number	8.	Full Name	CITY	STATE A	ZIP CODE A	
	8.	Full Name	CITY A	1	ZIP CODE A	
		Full Name	fy by name, address (phone number – optional)			
	8.	Full Name	CITY	STATE A	ZIP CODE A	
	8.	Full Name	CITY A	1	ZIP CODE <b>A</b>	
	8.	Full Name	CITY A	1	ZIP CODE <b>A</b>	
	8.	Full Name	CITY A	1	ZIP CODE A	
9 Ranks or Other Denositories: List all hanks or other denositories in which the committee denosits funds, holds accounts, ren		Full Name Mailing Address  TITLE OR POSITION	CITY A	ephone Number		
<ol> <li>Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rensafety deposit boxes or maintains funds.</li> </ol>		Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor	CITY A  CITY A  Tele  pries: List all banks or other depositories in which the	ephone Number		
safety deposit boxes or maintains funds.		Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or meaning the safety deposit boxes or meaning	CITY A  CITY A  Tele  pries: List all banks or other depositories in which the	ephone Number		
		Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or means of Bank,	CITY A  CITY A  Tele  pries: List all banks or other depositories in which the	ephone Number		
safety deposit boxes or maintains funds.  Name of Bank,		Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A  CITY A  Tele  pries: List all banks or other depositories in which the	ephone Number		
safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.		Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A  CITY A  Tele  pries: List all banks or other depositories in which the	ephone Number		
safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.		Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A  CITY A  Tele  pries: List all banks or other depositories in which the	ephone Number		

FEC Form 1S (Revised 02/2017)

	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spor
PROTECTING TH	E MAJORITY		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	, , , , , , , VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Jo	oint Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify	by name, address (phone number - optional)		
Full Name	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name			
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY		
Full Name Mailing Address  TITLE OR POSITION	CITY   CITY   ies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor of the deposition boxes or main arms of Bank,	CITY   CITY   ies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor of the deposition boxes or main arms of Bank,	CITY   CITY   ies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail	CITY   CITY   ies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail	CITY   CITY   ies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Banks or Other Depositors of Banks or Other Depositors or management of Bank, Depository, etc.  Mailing Address		other depositories in which	the committee deposit	s funds, holds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.		other depositories in which	the committee deposit	s funds, holds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.		other depositories in which	the committee deposit	s funds, holds accounts, rents
Banks or Other Depositorsafety deposit boxes or management		other depositories in which	the committee deposit	s funds, holds accounts, rents
Banks or Other Deposito		other depositories in which	the committee deposit	s funds, holds accounts, rents
TITLE OR POSITION				
TITLE OR POSITION		т	elephone Number	
	<b>V</b>	CITY A	STATE ▲	ZIP CODE ▲
				1 , , 1_1 .
Mailing Address				
Designated Agent: Identif	y by name, address (ph	one number – optional)		
			t i unuraising nepresenta	Leadership PAC Spo
	d Organization		TAIE ▲ t Fundraising Representa	
Relationship:	ATHENS	CITY A	GA STATE ▲	30605 ZIP CODE ▲
	ATHEMO			30605
Mailing Address	824 S MILLEDGE AV	/E STE 101		
2020 OLIVATE DA	TITEOROUND			
Name of Any Connected			raising Representative	e, or Leadership PAC Sponso
4.			1 LO 1D Humber	0
1			FEC ID number	C
3.			FEC ID number	C
2			FEC ID number	C

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	ries: List all banks or		STATE A relephone Number the committee deposit	zip code 🛦
Banks or Other Depositors of Bank, Depository, etc.	ries: List all banks or	т	elephone Number	
Banks or Other Depositors of Bank, Depository, etc.	ries: List all banks or	т	elephone Number	
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or	т	elephone Number	
Banks or Other Deposito	ries: List all banks or	т	elephone Number	
		т	elephone Number	
TITLE OR POSITION	<b>▼</b>	I	1	ZIP CODE A
TITLE OR POSITION	<b>▼</b>	CITY ▲	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
Designated Agent: Identif	y by name, address (	phone number – optional)		
Connecte	d Organization	ffiliated Committee	t Fundraising Representa	ative Leadership PAC Spo
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
	WASHINGTON		DC	20039
Mailing Address	FO BOX 00148			
	PO BOX 60148			
Name of Any Connected	_	ted Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponso
4			FEC ID number	C
. 1			FEC ID number	C
3.			FEC ID number	C

FEC Form 1S (Revised 02/2017)

n). <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	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spor
KEEP THE SEN	ATE RED		1 1 1 1 1 1 1 1
Mailing Address	PO BOX 76024		
	WASHINGTON	DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identi	Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)  CITY		
Pesignated Agent: Identic	fy 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 fety deposit boxes or m	fy 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 fety deposit boxes or mane of Bank,	fy 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 fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A