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FEC FORM 1	STATEMEI ORGANIZ		0#									
1. NAME OF	(Check if name	Example:If typing, type		ce Use Only								
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5									
ADDRESS (number and street)	310 FIRST STREET SE											
(Check if address	1											
is changed)	WASHINGTON		DC 2000	13 13								
			L L STATE ▲									
COMMITTEE'S E-MAIL ADDR	ESS											
(Check if address is changed)	compliance@gop.com											
	Optional Second E-Mail Ad	dress										
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DDRESS (URL)											
	22 / 2018											
3. FEC IDENTIFICATION N	IUMBER ► C c	:00003418										
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 i	t is true, correct and	complete.								
Type or Print Name of Treasur	er PARKER, ANTHONY, W., M	IR.,										
Signature of Treasurer	KER, ANTHONY, W., MR.,	[Electronically Filed]	Date 02	22 / Y Y Y Y 2018								
NOTE: Submission of false, error		may subject the person signing		penalties of 2 U.S.C. §437g.								
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)								

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FEC FC	orm 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF 0	COMMITTEE	
Candidat	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. (Comp information below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	tion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Col	nmittee:	
(d) X		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is
	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 second committee. (i.e., nonconnected committee)	gregated 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 Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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.	o or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

## **REPUBLICAN NATIONAL COMMITTEE**

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

	IANDEL VICTORY CO	#267 WASHINGTON DC 20003 CITY STATE ZIP CODE														
	Mailing Address	611 PENNSYLVANIA AVE SE														
		#267														
		WASHINGTON		DC 20003												
	Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponso															
7.																
	books and records.	ing by name, address (phone number op			oossession of committee											
	books and records.				oossession of committee											
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	books and records. Parker, An Full Name	thony, W, Mr,														
	books and records. Parker, An Full Name	thony, W, Mr,														

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	Parker, Anthony, W, Mr,
Mailing Address	310 FIRST ST, SE
	WASHINGTON         DC         20003         -
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number     202     863     8560

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent								1					1	I				I												
Mailing Address																														
																							L							
	CITY																	STA	ΤE				ZII	PC	COD	۶E				
Title or Position																														
										Tele	eph	one	e ni	umt	ber															

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.

BB&	T														
Mailing Address	1909 K Street NW														
	Washington														
	CITY	STATE	ZIP CODE												
Name of Bank, Deposito	ry, etc.														
Chai	n Bridge Bank														

Mailing Address																														
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	McLean																VA			2	210	)1				- [				
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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor HAWLEY WIN FUND

Mailing Address	PO BOX 9891												
				VA 222	19								
Relationship:		CITY 🔺		STATE A ZIP CODE A									
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																															
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TITLE OR POSITION	TITLE OR POSITION V																	S	TAT	E					ZIF	C	DC	E				
	Tele													Telephone Number											]							

Name of Bank, EAGLE Depository, etc.	BANK		
Mailing Address	2001 K ST NW		
		DC 2000	D6
	CITY 🔺	STATE A	ZIP CODE

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3.	FEC ID number C	
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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor House Majority Trust

Mailing Address	228 S. Washington Street	
	Suite 115	
	Alexandria	VA 22314
Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
Connected 0	Organization	X Joint Fundraising Representative

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

Full Name							
Mailing Address							
TITLE OR POSITION	7	CITY A	STATE A	ZIP CODE			
Telephone Number         -							

Name of Bank, Depository, etc.																							
Mailing Address	L																						
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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor MARK WALKER VICTORY COMMITTEE

	PO BOX 9891				
Mailing Address					
	ARLINGTON		1	VA 222	
Relationship:		CITY 🔺		STATE 🔺	ZIP CODE
Connected	Organization Affiliate	ed Committee	× Joint Fundraising	Representative	Leadership PAC Sponsor

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

Full Name							
Mailing Address							
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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Massachusetts Victory Committee

Mailing Address	310 First Street SE			
-				
	Washington			03
Relationship:	CITY 🔺		STATE A	ZIP CODE
Connected (	Organization	X Joint Fundraising	g Representative	Leadership PAC Sponsor

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

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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor PA IN 18

Mailing Address	PO BOX 26141										
				VA 2231	13 						
Relationship:		CITY 🔺		STATE 🔺	ZIP CODE						
Connected Organization											

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

Full Name												
Mailing Address												
TITLE OR POSITION	7	CITY A	STATE A	ZIP CODE								
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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Romney Victory Inc

Mailing Address	C/O Red Curve Solutions	
	138 Conant Street, 2nd Floor	
	Beverly	MA 01915 −
Relationship:		STATE ▲ ZIP CODE ▲
Connected (	Organization	Joint Fundraising Representative

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

Full Name				
Mailing Address				
TITLE OR POSITION	•	CITY A	STATE A	ZIP CODE
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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Strengthen the Majority Committee

Mailing Address	PO Box 9891												
-													
				VA 2221	19								
Relationship:	C	ITY 🔺		STATE 🔺	ZIP CODE								
Connected	Organization Affiliated	Committee X	Joint Fundraising	Leadership PAC Sponsor									

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

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	-	-	aising Representative, or Leadership PAC Sponsor
Tru	Imp Make Amer	rica Great Again Committee	
I	Vailing Address	C/O Red Curve Solutions	
		138 Conant Street, 2nd Floor	
		Beverly	MA 01915
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	Connected		
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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Trump Victory

Mailing Address	C/O Red Curve Solutions	
	138 Conant Street, 2nd Floor	
	Beverly	MA 01915
Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
Connected	Organization	Joint Fundraising Representative

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

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