Only

STATEMENT OF **ORGANIZATION**

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FEC FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Huizenga Victory Fund PO Box 2485 ADDRESS (number and street) (Check if address is changed) Springfield 22152 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS huizengavf@concentricoffice.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00580043 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. Carlin, Robert F., , , Type or Print Name of Treasurer Carlin, Robert F., , , [Electronically Filed] 05 2017 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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		OMMITTEE				
Car	ndidate	lidate Committee:				
(a)	Ш	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. (Complete the candidate information below.)				
Nam Cand	e of didate					
	didate y Affiliatio	Office Sought: House Senate President	State			
(c)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
Nam Cand	e of didate					
Par	ty Com	nmittee:				
(d)		(National, State	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 conr	nected organization is a			
		Corporation Corporation w/o Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperative			
			Cooperative			
(0)	_	In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	Ш	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (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.)				
Join	t Fund	raising Representative:				
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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			
	Committees Participating in Joint Fundraiser					
	1.	HUIZENGA FOR CONGRESS	59297			
	2.	UPPER HAND FUND FEC ID number C C005	03151			
	3.	NRCC FEC ID number C C000	75820			
	4.					

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Write or Type Committee Name		<u> </u>
Huizenga Victory	v Fund	
	ganization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Identi books and records. 	fy by name, address (phone number optional) and position of the persor	n in possession of committee
Carlin, Sue,	,,	
	8136 Old Keene Mill Road	
Mailing Address	Suite A300	
	Springfield VA 2	2152
Title or Position	CITY STATE	ZIP CODE
Asst. Treasurer	Telephone number 703	_ 569 9481
8. Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and sistant treasurer).	the name and address of
Full Name Carlin, Robe	rt F., , ,	
of Treasurer	PO Box 2485	
Mailing Address	<u> </u>	
ļ		
		2152
Title or Position Treasurer	CITY STATE 703 Telephone number	ZIP CODE

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Full Name of Designated Agent		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
Title of 1 osition	Telephone number	
Banks or Other safety deposit be Name of Bank,	Depositories: List all banks or other depositories in which the committee deposits funds, hole xes or maintains funds. Depository, etc. Huntington Bank 1901 Breton Rd SE	us accounts, rems
	Grand Rapids MI 49506	
	CITY STATE	
		ZIP CODE
Name of Bank,	Depository, etc.	ZIP CODE
Name of Bank,	Depository, etc.	
Name of Bank, Mailing Address		