FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Republican Federal Committee of Pennsylvania 3501 North Front Street ADDRESS (number and street) (Check if address is changed) Harrisburg 17110 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address joel@rightwaycompliance.com is changed) Optional Second E-Mail Address laura@rightwaycompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address www.pagop.org is changed) DATE 2025 C00044842 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. Type or Print Name of Treasurer Demarco, Samuel, , , III Demarco, Samuel, , , III 05 22 2025 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

EC	Form	I (Revised 03/2022)	Page 2
	TYPE C	F COMMITTEE:	
	Candid	ate 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. (Complete the information below.)	e candidate
	Name Candid		
	Candid Party	date Office House Senate President	State
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Nam Cand	e of didate	
	Party (Committee:	
	(d) X	This committee is a STA (National, State or subordinate) committee of the REP Republican,	etc.) Party
	Politica	al Action Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
		Corporation Corporation w/o Capital Stock Labor C	rganization
		Membership Organization Trade Association Coopera	
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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.)	
	(g)	This committee is an independent expenditure-only political committee (Super PAC).	
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(h)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	AC).
		In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint F	undraising Representative:	
	(i)	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.	r more political
	(j)	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.	r more political
	Com	mittees Participating in Joint Fundraiser	
	1.	C	

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	FEC Form 1 (Revised 0	(2/2009)	Page 3
٧	Vrite or Type Committee Name	and Committee of Decree descrip	
_	•	eral Committee of Pennsylvania	
6.		rganization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
	Smucker Victory Con	nmittee 	
			, , , , , , , , , , , , ,
		2010 1411 1	
	Mailing Address	824 S. Milledge Avenue	
		Suite 101	
		Athens	30605
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representat	
	Connected	Organization Anniated Organization > John Fundialsing Representation	Loadolollip i Ao Opolio
7.		ify by name, address (phone number optional) and position of the person	in possession of committee
	books and records.		
	Jukus, Joe	l, , ,	
	Full Name	2504 North Front Street	
	Mailing Address	3501 North Front Street	
		<u> </u>	
		Harrisburg	17110
		CITY A STATE A	7ID CODE 4
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	Compliance Consultan	. 7	17 395 1636
		Telephone number	
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
		Samuel, , , III	
	of Treasurer		
	Mailing Address	3501 North Front Street	
		Harrisburg PA	<u> </u>
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	7 Telephone number	17 - 234 - 4901

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position ▼	,	
	Depositories: List all banks or other depositories in which the committee deposits funds, hold ses or maintains funds.	s accounts, rents
Name of Bank, D	epository, etc.	
	Truist Bank	
Mailing Address	1909 K Street, N.W.	
	Washington 20006	
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
	First National Bank	
Mailing Address	1 North Shore Center, #503	
	Pittsburgh PA 15212	
	CITY ▲ STATE ▲	ZIP CODE ▲

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Trump Victory			
Mailing Address	c/o Red Curve Solutions		1 1 1 1 1 1 1 1 1
	131 Conant Street, 2nd Floor		
	Beverly	MA MA	01915
Data Carada		STATE ▲	ZIP CODE ▲
	d Organization	int Fundraising Representa	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee X Jo		ative Leadership PAC Spo
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Connecte Designated Agent: Identif	d Organization Affiliated Committee X Jo y by name, address (phone number – optional)		Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee X Jo y by name, address (phone number – optional) CITY	int Fundraising Representa	
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of the control of	d Organization Affiliated Committee X Jo y by name, address (phone number – optional) CITY A pries: List all banks or other depositories in which	state Telephone Number	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or mail and of Bank, Depository, etc. Chain	d Organization Affiliated Committee X Jo y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds. Bridge Bank	state Telephone Number	ZIP CODE A

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

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5(g) or (h).	Joint Fundraising	Participant:		
1	1		FEC ID number	C
2	2.		FEC ID number	C
3	3.		FEC ID number	С
	4.		FEC ID number	C
6. Nam	ne of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
Te	eam Fitz			
	Mailing Address	P. O. Box 30844		
	-			
		Bethesda	MD	20824
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Ful	ndraising Representa	Leadership PAC Sponsor
		by name, address (phone number – optional)		
F	Full Name	by name, address (phone number – optional)		
F		by name, address (phone number – optional)		
F	Full Name	by name, address (phone number – optional)		
F	Full Name			
F	Full Name	CITY A	STATE A	ZIP CODE A
F	Full Name	CITY A	STATE A	ZIP CODE A
9. Banl safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositori ty deposit boxes or main	CITY CITY Telep es: List all banks or other depositories in which the	hone Number	
9. Banl safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositori ty deposit boxes or main the of Bank, ository, etc. Wells Fa	CITY CITY Telep es: List all banks or other depositories in which the ntains funds. argo Bank	hone Number	

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	FEC ID number	C
	FEC ID number	С
	FEC ID number	С
I Organization, Affiliated Committee, Joint Fu	indraising Representative	e, or Leadership PAC Spon
1201 F Street, N.W.		
Suite 675		
Washington	DC	20004
CITY A	STATE ▲	ZIP CODE ▲
fy by name, address (phone number – optional)	
fy by name, address (phone number – optional)	
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fy by name, address (phone number – optional		
fy by name, address (phone number – optional	STATE A	ZIP CODE A
	tory Fund 1201 F Street, N.W. Suite 675 Washington CITY	FEC ID number I Organization, Affiliated Committee, Joint Fundraising Representative ctory Fund 1201 F Street, N.W. Suite 675 Washington DC CITY STATE

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

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1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Team Perry Victory			
Moiling Address	3501 N. Front Street, #200		
Mailing Address			
	Harrisburg	ı PAı	17110
Relationship:			
neialionsnip.	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Joint	Fundraising Representa	Leadership PAC Sp
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ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
NRSC Victory			
Mailing Address	228 S. Washington Street		1 1 1 1 1 1 1 1 1
	Suite 115		1 1 1 1 1 1 1 1 1
	Alexandria	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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r(h). Joint Fundraisir	g Participant:		
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Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Grow the Majority			
Mailing Address	228 S. Washington Street		
-	Suite 115		
	Alexandria	l VA I	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization	Fundraising Representa	Leadership PAC Sponso
Designated Agent: Identif	y by name, address (phone number – optional)		
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h). Joint Fundrais i	ng Participant:		
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ame of Any Connected	d Organization, Affiliated Committee, Joint	Fundraising Representativ	re, or Leadership PAC Spon
Team McCormick			
Mailing Address	P. O. Box 23537		
3			
	Pittsburgh	PA	15222
Relationship:	CITY A	STATE A	ZIP CODE 🛦
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-	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spon
Trump 47 Committee	e, inc.		
Mailing Address	P. O. Box 509		
	Arlington	VA	22216
Relationship:	CITY A	STATE A	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number - optional)	
esignated Agent: Identif	y by name, address (phone number – optional)	
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Full Name	y by name, address (phone number – optional		
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_	Organization, Affiliated Committee, Joint	Fundraising Representative	e, or Leadership PAC Spon
Team GT			
Mailing Address	P. O. Box 30844		
	Bethesda	MD	20824
Relationship:	CITY A	STATE A	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number – option	al)	
Mailing Address			
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Team Rob			Live, of Leadership FAO Spor
Mailing Address	824 S. Milledge Avenue		
	Suite 101		
	Athens	GA	30605
Relationship:	CITY ▲	STATE	ZIP CODE ▲
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	Participant:		
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4.		FEC ID number	C
Name of Any Connected (Organization, Affiliated Committee, Joir	nt Fundraising Representativ	e, or Leadership PAC Sponsor
CAREY LAHOOD FIT	ZPATRICK MALLIOTAKIS (CLFM) \	/ICTORY FUND	
Mailing Address	PO B0X 26141		
	ALEXANDRIA	VA VA	22313
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	X Joint Fundraising Represent	ative Leadership PAC Spons
Full Name			
Mailing Address			
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TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
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