**FEC** 

Only

# STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. NRCC 320 FIRST STREET SE ADDRESS (number and street) (Check if address is changed) WASHINGTON DC 20003 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS kdavis@hdafec.com (Check if address is changed) Optional Second E-Mail Address kwilliams@nrcc.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address www.nrcc.ora is changed) DATE 2022 C00075820 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Davis, Keith A., , , Type or Print Name of Treasurer Davis, Keith A., , , [Electronically Filed] 07 2022 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

FEC Form 1 (Revised 03/2022)		Page <b>2</b>
. TYPE OF COMMITTEE:		
Candidate Committee:		
(a) This committee is a principal car	mpaign committee. (Complete the candidate information be	elow.)
(b) This committee is an authorized information below.)	committee, and is NOT a principal campaign committee.	(Complete the candidate
Name of Candidate		
	Office Sought: House Senate Pre	State esident District
(c) This committee supports/opposes	s only one candidate, and is NOT an authorized committee	e.
Name of Candidate		
Party Committee:		
(d) This committee is a NAT	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):		
(e) This committee is a separate seg	gregated fund. (Identify connected organization on line 6.)	Its connected organization is a:
Corporation	Corporation w/o Capital Stock	Labor Organization
Membership Organization	Trade Association	Cooperative
In addition, this commit	ttee is a Lobbyist/Registrant PAC.	
	s more than one Federal candidate, and is NOT a separa	ate segregated fund or party
In addition, this commit	ttee is a Lobbyist/Registrant PAC.	
In addition, this commit	ttee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independer	nt expenditure-only political committee (Super PAC).	
In addition, this commit	ttee is a Lobbyist/Registrant PAC.	
(h) This committee is a political com	mittee with both contribution and non-contribution accoun	nts (Hybrid PAC).
In addition, this commit	ttee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:		
(i) This committee collects contributi	ions, pays fundraising expenses and disburses net proceed to one of which is an authorized committee of a federal ca	·
(1)	ions, pays fundraising expenses and disburses net proceed of which is an authorized committee of a federal candidate	•
Committees Participating in Joint Fun-	draiser	
1.	C	

	FEC Form 1 (Revised 0.	2/2009)	Page <b>3</b>
W	rite or Type Committee Name		
	NRCC		
6.	Name of Any Connected Or COLE COMBINED C	ganization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
	Mailing Address	12176 CHANCERY STATION CIRCLE	
		RESTON VA 20	0190
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization  Affiliated Organization  X Joint Fundraising Representative	Leadership PAC Spons
			_
	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the person in pos	ssession of committee
	Davis, Keith	A., , ,	
	Full Name		
	Mailing Address	320 First Street SE	
		Washington DC   20	0003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	-  429   -  7000
	Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and t ssistant treasurer).	the name and address of
	Full Name Davis, Keith	A., , ,	
	of Treasurer		
	Mailing Address	320 First Street SE	
		Washington DC 20	0003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	_ 429 7000

FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent	Williams, Katy, , ,		
Mailing Address	320 First Street SE		
	Washington	DC	20003
Title or Position <b>▼</b>	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasur		umber 2	202 - 429 - 7000
	<b>Depositories:</b> List all banks or other depositories in which the comm es or maintains funds.	ittee deposits t	funds, holds accounts, rents
Name of Bank, D	epository, etc.		
	Wells Fargo		
Mailing Address	1753 Pinnacle Drive		
	McLean	VA	22102
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Country Club Bank	1 1 1 1 1	
Mailing Address	P.O. Box 410889		
	Kansas City	MO	64141
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	SOUTH JERSEY	FIRST		
	Mailing Address	C/O RED CURVE SOLUTIONS		
	Ü	138 CONANT STREET 2ND FLOOR		
		BEVERLY	MA _	01915
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
		1	elephone Number	
9.				
	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposits	s funds, holds accounts, rents
	safety deposit boxes or ma		the committee deposits	s funds, holds accounts, rents
	safety deposit boxes or ma	aintains funds.	the committee deposits	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	of Tampa	the committee deposits	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	of Tampa	the committee deposits	s funds, holds accounts, rents

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5(a)	or(h). <b>Joint Fundraisin</b>	g Participant:		
O(9)	1		FEC ID number	C
	2.		FEC ID number	C
			FEC ID number	C
	3.			
	4		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		I contract contract		I I-I I
		CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	1	lephone Number	
_				
9.	Name of Bank, First M	ries: List all banks or other depositories in which t intains funds.	he committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Pirst M Depository, etc.	intains funds.	he committee deposit	s funds, holds accounts, rents
9.	Name of Bank, First M	intains funds. erit Bank	he committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Pirst M Depository, etc.	intains funds. erit Bank	he committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Pirst M Depository, etc.	intains funds. erit Bank	the committee deposit	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	
			C
3		FEC ID number	С
	<u> </u>	FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fo	undraising Representativ	e, or Leadership PAC Spon
JACOBS VICTOR	Y COMMITTEE		
I			
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC S <sub>l</sub>
esignated Agent: Identify	by name, address (phone number - optiona	1)	
esignated Agent: Identify	by name, address (phone number – optiona	i)	
	by name, address (phone number – optiona	i)	
Full Name	by name, address (phone number – optiona	I)	
Full Name		I)	
Full Name	CITY A		ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
PARNELL VICTO	DRY COMMITTEE		
Mailing Address	PO BOX 1488		
	CRANBERRY TOWNSHIP	PA	16066
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
Connecte	Affiliated Committee  Jointy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification		nt Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification  Full Name  Mailing Address	by by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identification	by by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	by by name, address (phone number – optional)  CITY   CITY   City   Dries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, BMO	by by name, address (phone number – optional)  CITY   CITY   City   Dries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, BMO	y by name, address (phone number – optional)  CITY   CITY   pries: 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 mame of Bank, epository, etc.	cories: List all banks or other depositories in which aintains funds.  Harris Bank NA	STATE A Telephone Number	ZIP CODE A
connected esignated Agent: Identification of the position of t	cories: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
	of Any Connected C	Organization, Affiliated Committee, Joint Fundraisi	ng Representative	e, or Leadership PAC Sponsor
	NT VICTORY F			
N	Mailing Address	332 W LEE HWY		
	· ·	#303		
		WARRENTON	VA	20186
F	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
				_
B. <b>Desig</b> r	nated Agent: Identify	by name, address (phone number – optional)		
	nated Agent: Identify	by name, address (phone number – optional)	1 1 1 1 1 1	
Ful		by name, address (phone number – optional)		
Ful	II Name	by name, address (phone number – optional)		
Ful	II Name	by name, address (phone number – optional)		
Ful Ma	II Name	CITY A	STATE A	ZIP CODE A
Ful Ma	II Name	CITY A	STATE A	ZIP CODE A
Ful Ma	II Name	CITY A		ZIP CODE <b>A</b>
Ful Ma	II Name	CITY   CITY   Telepi  es: List all banks or other depositories in which the	none Number	
Ful Ma	II Name ailing Address  ITLE OR POSITION Y  or Other Depositori deposit boxes or main	CITY   CITY   Telepi  es: List all banks or other depositories in which the	none Number	
Ful Ma	ailing Address  ITLE OR POSITION  or Other Depositori deposit boxes or main of Bank, First Nationy, etc.	CITY   CITY   Telepl  es: List all banks or other depositories in which the ntains funds.	none Number	
Ful Ma	Il Nameailing Address  ITLE OR POSITION To or Other Depositori deposit boxes or main of Bank, First Na	CITY   CITY   Telepl  es: List all banks or other depositories in which the ntains funds.	none Number	
Ful Ma	ailing Address  ITLE OR POSITION  or Other Depositori deposit boxes or main of Bank, First Nationy, etc.	CITY   CITY   Telepl  es: List all banks or other depositories in which the ntains funds.	none Number	

FEC Form 1S (Revised 02/2017)

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

h). <b>Joint Fundraisir</b>	ig 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 Fur	ndraising Representativ	e, or Leadership PAC Spon
SMITH VICTORY			
Mailing Address	824 S. MILLEDGE AVENUE		
Mailing Address	SUITE 101		
	ATHENS	ı GA ı	30605
Relationship:	CITY A	STATE A	ZIP CODE A
rielationship.	CITY	SIAIE	ZIP CODE A
	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
		-	ative Leadership PAC Sp
esignated Agent: Identif		-	ative Leadership PAC Sp
esignated Agent: Identif		-	ative Leadership PAC Sp
esignated Agent: Identif		-	Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional)	-	
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)		
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)	STATE A	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, Prosp	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in white aintains funds.  erity Bank	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in white aintains funds.  erity Bank	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisin</b>	g Participant:			
1.		FEC II	0 number	С
2.		FEC II	O number	С
3.		FEC II	0 number	C
4.		FEC II	) number	C
	Organization, Affiliated Committee, Joint I	Fundraising Re	oresentativ	e, or Leadership PAC Spor
WALBERG VICTO	JRY FUND			
	PO BOX 1362			
Mailing Address				
	JACKSON		MI	49204
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
				_
esignated Agent: Identify	y by name, address (phone number – option	al)		
	y by name, address (phone number – option	al)		
Full Name	y by name, address (phone number – option	al)		
Full Name				
Full Name	CITY A		STATE A	ZIP CODE A
Full Name	CITY A			
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito fety deposit boxes or material deposit boxes deposit box	CITY ▲  ries: List all banks or other depositories in v	Telephone N	umber	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito fety deposit boxes or material depositions are presented by the position of the property	CITY ▲  ries: List all banks or other depositories in valintains funds.	Telephone N	umber	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	CITY ▲  ries: List all banks or other depositories in vaintains funds.  unties Bank	Telephone N	umber	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor detay deposit boxes or material deposit boxes or material depository, etc.	CITY ▲  ries: List all banks or other depositories in vaintains funds.  unties Bank	Telephone N	umber	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b> r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spon
BOST VICTORY	FUND		
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	, GA	30605
Relationship:	CITY A	STATE A	ZIP CODE A
		SIAIL	ZII OODL 🛋
Connecte	d Organization Affiliated Committee Jacobs Jacobs Jacobs Affiliated Committee Jacobs J	oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif		oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif		oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif		oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif		pint Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identif	y by name, address (phone number – optional)	oint Fundraising Represent	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)		
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material boxes or material boxes or material boxes.  Bryant epository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: 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 Bank, Bryania	y by name, address (phone number – optional)  CITY   CITY   pries: 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 material boxes or material boxes or material boxes.  Bryant epository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Sponso
KATKO VICTORY	7 FUND		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, , , , , , , VA ,	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spor
Full Name			
Mailing Address			
Mailing Address			
Mailing Address			
	CITY A	STATE A	ZIP CODE A
Mailing Address  TITLE OR POSITION	CITY A	STATE   Telephone Number	ZIP CODE <b>A</b>
TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which	STATE ▲ Telephone Number	
Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which aintains funds.  in Synergy Bank	STATE ▲ Telephone Number	

FEC Form 1S (Revised 02/2017)

rganization, Affiliated Committee, Joint Fundar COMMITTEE 2020	FEC ID number FEC ID number FEC ID number FEC ID number	C C C C ce, or Leadership PAC Spons
_	FEC ID number	C
_	FEC ID number	С
_		
_	raising Representativ	e, or Leadership PAC Spon
47 FLINTLOCK DRIVE		
SHIRLEY	NY NY	11967
CITY A	STATE A	ZIP CODE ▲
oy name, address (phone number – optional)		
oy name, address (phone number – optional)		
oy name, address (phone number – optional)		
	STATE A	ZIP CODE A
	SHIRLEY  CITY	SHIRLEY NY STATE A

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisin</b>	n Participant		
1.	y Fariicipani.	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
	P.O. Box 2485		
Mailing Address			
	Springfield	, , VA ,	, 22152
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represent	
Full Name			
Mailing Address			
	CITY ▲	STATE A	ZIP CODE A
TITLE OR POSITION	▼ 5111 <b>2</b>	1	1 1 1 1
		Telephone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in whintains funds.	ich the committee deposi	ts funds, holds accounts, rents
Mailing Address	333 E. Main Street		
			<u>                                     </u>
	Midland	TX	48640
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). <b>Joint Fundraisin</b>	g Participant:		
	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 Fundraisi	ng Representative	e, or Leadership PAC Sponsor
		. D.O. Poy 704		
	Mailing Address	P.O. Box 701		
		Clayton	NC NC	27528
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	ndraising Representa	Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma	CITY A  Telepl  ries: List all banks or other depositories in which the	STATE ▲	
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or matching and provided the safety deposit boxes.	CITY   CITY   Telepl  Ties: List all banks or other depositories in which the intains funds.	STATE ▲	
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   CITY   Telepl  ries: List all banks or other depositories in which the intains funds.  nancial Bank	STATE ▲	
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   CITY   Telepl  ries: List all banks or other depositories in which the intains funds.  nancial Bank	STATE ▲	

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
4.			
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
RODNEY DAVIS	VICTORY FUND		
Mailing Address	P.O. Box 9891		
	Arlington	, , , VA ,	22219
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee  Affiliated Committee  Figure 1. Joint 1. Joi	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Hepresent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identi		T Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		T Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE 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   To	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: 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 Deposit afety deposit boxes or m  ame of Bank, Zions	fy by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which naintains funds.	STATE A	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.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which paintains funds.  Bank	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or m  ame of Bank, Zions	fy by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which naintains funds.	STATE A	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.	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which raintains funds.  Bank  1 South Main Street	STATE A	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.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which paintains funds.  Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1			
		FEC ID number	C
3		FEC ID number	C
0.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Mailing Address	2345 GRAND BLVD SUITE 2400		
	KANSAS CITY	MO	64108
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	y by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		lephone Number	
	ries: List all banks or other depositories in which	the committee deposit	s funds, holds accounts, ren
afety deposit boxes or ma ame of Bank, <sub> </sub> <b>Flagst</b> a			
afety deposit boxes or maximum are of Bank, Flagsta epository, etc.	ar		

FEC Form 1S (Revised 02/2017)

2	FEC ID number  FEC ID number  C  FEC ID number  C  FEC ID number  C  STATE A  STATE	n). <b>Joint Fundraisin</b>	g Participant:		0 ' ' ' '
3.	FEC ID number  FEC ID number  C  zation, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spor  JND  S. MILLEDGE AVENUE  TE 101  HENS  GA  ZIP CODE A  Zation  Affiliated Committee  Joint Fundraising Representative  Leadership PAC S  me, address (phone number – optional)  CITY A  STATE A  ZIP CODE A  Telephone Number  Telephone Number  Telephone Number  Telephone Sits funds, holds accounts, rer funds.  Ik  est 23rd Street	1.		FEC ID number	С
4. FEC ID number C  ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Signated Agent: Identify by name, address (phone number – optional)  Full Name Mailing Address  Affiliated Committee ■ Joint Fundraising Representative ■ Leadership PAC Signated Agent: Identify by name, address (phone number – optional)  Full Name ■ Telephone Number ■ Zip CODE ■ Telephone Number	FEC ID number  C  zation, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spor JND  S. MILLEDGE AVENUE  TTE 101  HENS  CITY A  STATE A  ZIP CODE A  Ization Affiliated Committee  Joint Fundraising Representative  Leadership PAC S  me, address (phone number – optional)  CITY A  STATE A  ZIP CODE A  Telephone Number  Telephone Number  Telephone Number  Telephone State A  STATE A  ZIP CODE A  Telephone Number  Telephone Number  Telephone State A  STATE A  Telephone State A  STATE	2		FEC ID number	C
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC State Nucleon Sult 101  ATHENS  Relationship:  CITY A  STATE A  ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC  STATE A  ZIP CODE  Connected Organization  Affiliated Committee  Full Name  Mailing Address  Title OR POSITION   Title OR POSITION   Title OR Positiories: List all banks or other depositories in which the committee deposits funds, holds accounts, felty deposit boxes or maintains funds.  Summit Bank  Spository, etc.  Mailing Address  11 West 23rd Street  Mailing Address  11 West 23rd Street  Mailing Address  11 West 23rd Street	zation, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spor JND  S. MILLEDGE AVENUE  TE 101  HENS  CITY A STATE A ZIP CODE A  ization Affiliated Committee X Joint Fundraising Representative Leadership PAC S  me, address (phone number – optional)  CITY A STATE A ZIP CODE A  Telephone Number — ZIP CODE A  STATE A ZIP CODE A  Telephone Number — FL 32405	3.		FEC ID number	C
Mailing Address  824 S. MILLEDGE AVENUE  SUITE 101  ATHENS  Relationship:  CITY ▲  STATE ▲  ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAresignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number	S. MILLEDGE AVENUE  TTE 101  HENS  CITY A STATE A ZIP CODE A  ization Affiliated Committee S Joint Fundraising Representative Leadership PAC S  me, address (phone number – optional)  CITY A STATE A ZIP CODE A  Telephone Number – ZIP CODE A  Telephone Number – Leadership PAC S  st all banks or other depositories in which the committee deposits funds, holds accounts, rer funds.  ok  est 23rd Street	4.		FEC ID number	C
Mailing Address  824 S. MILLEDGE AVENUE  SUITE 101  ATHENS  GA 30605  Connected Organization  Affiliated Committee  ✓ Joint Fundraising Representative  Leadership PAI  Leadership PAI  Besignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ✓ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number – Telephone Number – Intelligence of State A State	S. MILLEDGE AVENUE  TE 101  HENS  CITY A  STATE A  ZIP CODE A  Ization Affiliated Committee  Joint Fundraising Representative  Leadership PAC S  Telephone Number  Telephone Number  Telephone Number  Telephone State A  Telepho	ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spor
ATHENS  ATHENS  CITY ▲ STATE ▲ ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAI  Paignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number	TE 101  HENS  CITY A STATE A ZIP CODE A  ization Affiliated Committee Joint Fundraising Representative Leadership PAC S  me, address (phone number – optional)  CITY A STATE A ZIP CODE A  Telephone Number — ZIP CODE A  Telephone Number — Management of the committee deposits funds, holds accounts, rentunds.  Mk  est 23rd Street	TURNER VICTOR	₹Y FUND		
ATHENS  ATHENS  CITY ▲ STATE ▲ ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAI  Paignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number	TE 101  HENS  CITY A STATE A ZIP CODE A  ization Affiliated Committee Joint Fundraising Representative Leadership PAC S  me, address (phone number – optional)  CITY A STATE A ZIP CODE A  Telephone Number — ZIP CODE A  Telephone Number — Management of the committee deposits funds, holds accounts, rentunds.  Mk  est 23rd Street				
Relationship:  CITY ▲  STATE ▲  ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAGE  esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  Telephone Number  STATE ▲  ZIP CODE ▲  Telephone Number	CITY A STATE A ZIP CODE A  ization Affiliated Committee X Joint Fundraising Representative Leadership PAC S  me, address (phone number – optional)  CITY A STATE A ZIP CODE A  Telephone Number — Telephone Number — STATE A S	Mailing Address			
Relationship:  CITY ▲ STATE ▲ ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAGE  esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  Telephone Number  Telephone Stants, ame of Bank, apository, etc.  Mailing Address  11 West 23rd Street  Mailing Address	CITY A STATE A ZIP CODE A  ization Affiliated Committee X Joint Fundraising Representative Leadership PAC S  me, address (phone number – optional)  CITY A STATE A ZIP CODE A  Telephone Number – ZIP CODE A  st all banks or other depositories in which the committee deposits funds, holds accounts, renfunds.  nk  est 23rd Street		SUITE 101		
Connected Organization	Affiliated Committee  Joint Fundraising Representative  Leadership PAC S  me, address (phone number – optional)  CITY A STATE ZIP CODE A  Telephone Number  st all banks or other depositories in which the committee deposits funds, holds accounts, rer funds.		ATHENS	GA L	30605
Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number	me, address (phone number – optional)  CITY   STATE   ZIP CODE   Telephone Number   Telephone Number   st all banks or other depositories in which the committee deposits funds, holds accounts, renfunds.	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  ———  Telephone Number  ———  Telephone Number  ———  Telephone Number  ———  Telephone Number  ————  Telephone Number  ————  Telephone Number  ————  Telephone Number  ————  Telephone Number  ———————————————————————————————————	Telephone Number  Telephone Nu			t Fundraising Representa	ative Leadership PAC S
TITLE OR POSITION   CITY   Telephone Number  Tel	Telephone Number  Telephone Nu	esignated Agent: Identify		t Fundraising Representa	ative Leadership PAC S
TITLE OR POSITION   CITY   Telephone Number  Tel	Telephone Number  Telephone Nu	esignated Agent: Identify  Full Name		t Fundraising Representa	Leadership PAC S
Telephone Number  Telephone Nu	Telephone Number  Telephone Nu	esignated Agent: Identify  Full Name		t Fundraising Representa	Leadership PAC S
Telephone Number  Telephone Nu	est 23rd Street  ama City  FL 32405	esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
ame of Bank, Summit Bank epository, etc.  Mailing Address  11 West 23rd Street	funds.  nk  est 23rd Street  ama City  FL 32405	esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)		
Mailing Address  11 West 23rd Street	ama City FL 32405	esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)  CITY	STATE A	
		Full Name  Mailing Address  TITLE OR POSITION  Anks or Other Depositor fety deposit boxes or ma	r by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
Denoma City		Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor dety deposit boxes or maintenance of Bank, Summing pository, etc.	composition of the position of	STATE A	ZIP CODE A
Panama City   FL    32405		Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor dety deposit boxes or maintenance of Bank, Summing pository, etc.	composition of the position of	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisii	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
		FEC ID number	С
4			
=	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
BRAD WENSTRO	JP VICTORY FUND		
Mailing Address	PO BOX 30844		
-			
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	y by name, address (phone number – optional)		
esignated Agent: Identification Full Name  Mailing Address	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name			
Full Name Mailing Address  TITLE OR POSITION  Inks or Other Deposite fety deposit boxes or make the companion of Bank, First N	CITY A  Te  pries: List all banks or other depositories in which	STATE ▲	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, First N  epository, etc.	CITY ▲  CITY ▲  Te  pries: List all banks or other depositories in which aintains funds.  National Bank of Tennessee	STATE ▲	ZIP CODE ▲
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY ▲  CITY ▲  Te  pries: List all banks or other depositories in which aintains funds.  National Bank of Tennessee	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

g Participant:		
<b>~ .</b>	FEC ID number	C
Organization, Affiliated Committee, Joint Fo	ındraising Representativ	e, or Leadership PAC Sponsor
824 S. MILLEDGE AVENUE		
SUITE 101		
ATHENS	GA L	30605
CITY ▲	STATE ▲	ZIP CODE ▲
d Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Spons
▼ CITY ▲	STATE ▲	ZIP CODE ▲
	Telephone Number	
	ich the committee deposi	ts funds, holds accounts, rents
Gulf Bank		
900 Town & Country Lane		
Suite 100		
Houston	TX I	77024
	824 S. MILLEDGE AVENUE  SUITE 101  ATHENS  CITY A  Organization Affiliated Committee  CITY A  Pool Town & Country Lane  Suite 100	FEC ID number FE

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisin</b>	g 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
AND F BARR VIC	TORY COMMITTEE		
Mailing Address	332 W LEE HWY		
	#303   WARRENTON	ı VA ı	20186
Relationship:	CITY A	STATE A	ZIP CODE ▲
		Fundraising Representa	
Pull Name	by name, address (phone number – optional)		
Mailing Address			
	CITY <b>_</b>	STATE A	ZIP CODE ▲
TITLE OR POSITION	1	elephone Number	
Banks or Other Deposito safety deposit boxes or material Name of Bank, Depository, etc.  Mailing Address		the committee deposit	s funds, holds accounts, rents
	Nashville	TN	37203

FEC Form 1S (Revised 02/2017)

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

	g Participant:			
1.		FEC II	number	С
2.		FEC II	) number	С
3.		FEC II	number	C
4		FEC II	) number	С
	Organization, Affiliated Committee, Joint	Fundraising Rep	oresentativ	e, or Leadership PAC Spor
WILSON LEADER	RSHIP FUND			
	PO BOX 2456			
Mailing Address				
	SPRINGFIELD		L VA	22152
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number - option	al)		
esignated Agent: Identify	by name, address (phone number – option	aal)		
	by name, address (phone number – option	nal)		
Full Name	by name, address (phone number – option	nal)		
Full Name	by name, address (phone number – option			
Full Name	CITY A		STATE A	ZIP CODE A
Full Name	CITY A		STATE A	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	CITY A	Telephone N	STATE  umber	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	CITY A	Telephone N	STATE  umber	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or material depositions are of Bank, Indepe	CITY A	Telephone N	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or material depositions are of Bank, Indepe	CITY  CITY   Cies: List all banks or other depositories in the intains funds.	Telephone N	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma  ame of Bank, Indeperence of Bank, epository, etc.	CITY  CITY   ries: List all banks or other depositories in rintains funds.  ndent Bank	Telephone N	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma  ame of Bank, Indeperence of Bank, epository, etc.	CITY  CITY   ries: List all banks or other depositories in rintains funds.  ndent Bank	Telephone N	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) o	r(h). <b>Joint Fundraisin</b>	g Participant:			
	1.		FEC II	O number	C
	2.		FEC II	O number	C
	3.		FEC II	O number	C
	4.		FEC II	O number	C
6.		Organization, Affiliated Committee, Join	t Fundraising Rep	presentative	e, or Leadership PAC Sponsor
	TEAM GALLAGH	ER 			
		1915 SOUTH WEBSTER AVE			
	Mailing Address	STE D			
				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	F4201
	Deletienskin	GREEN BAY		WI	54301
	Relationship:	CITY ▲	_	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	✗ Joint Fundraisin	g Representa	ative Leadership PAC Sponso
			D.		
8.	Designated Agent: Identify	by name, address (phone number - option	onai)		
	Full Name				
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲		STATE A	ZIP CODE ▲
			Telephone N	lumber	
-					
		ies: List all banks or other depositories in	which the commi	ittee deposits	s funds, holds accounts, rents
	safety deposit boxes or ma	intains funds.			
	Name of Bank, Suncre Depository, etc.	st Bank			
	Mailing Address	663 W. Nees Avenue		1 1 1 1	
	Maining Addices				
		Fresno		CA	93711
		CITY ▲		STATE A	ZIP CODE ▲
				–	

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h). <b>Joint Fundraisi</b>	ng Participant:			
1.			FEC ID numb	per C
2.			FEC ID numb	per C
3.		1	FEC ID numb	per C
4.			FEC ID numb	per C
ame of Any Connected	Organization, Affiliated	Committee, Joint Fun	draising Represent	ative, or Leadership PAC Spor
STRONG AMER	CA FUND			
1				
Mailing Address	824 S MILLEDGE AVE	E, STE 101		
	ATHENS		G/	30605
Relationship:		CITY A	STAT	E ▲ ZIP CODE ▲
	d Organization Affilia		int Fundraising Repre	sentative Leadership PAC S
esignated Agent: Identi			int Fundraising Repre	sentative Leadership PAC S
esignated Agent: Identi			int Fundraising Repre	sentative Leadership PAC S
esignated Agent: Identi			int Fundraising Repre	sentative Leadership PAC S
esignated Agent: Identi			int Fundraising Repre	sentative Leadership PAC S
esignated Agent: Identi	y by name, address (pho		int Fundraising Repre	
esignated Agent: Identing Full Name	y by name, address (pho	one number – optional)		
esignated Agent: Identing Full Name	y by name, address (pho	one number – optional)	STATE	
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (pho	one number – optional)	STATE Telephone Number	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or marked to the content of	by by name, address (pho	one number – optional)	STATE Telephone Number	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, Cader	y by name, address (pho	one number – optional)	STATE Telephone Number	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.	by by name, address (pho	one number – optional)	STATE Telephone Number	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, Cader	by by name, address (pho	one number – optional)	STATE Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	by by name, address (pho	one number – optional)	STATE Telephone Number	ZIP CODE A  posits funds, holds accounts, rer

FEC Form 1S (Revised 02/2017)

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(g) or (h). <b>Joint Fundraisi</b>	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	I Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee	Fundraising Representa	Leadership PAC Sponso
Full Name			<u> </u>
Mailing Address			
Mailing Address			
Mailing Address			
	CITY A	STATE A	ZIP CODE A
Mailing Address  TITLE OR POSITION	V ▼ CITY ▲		
TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or meaning the safety deposit boxes or meaning the safety deposit boxes.	CITY A  Tel  pries: List all banks or other depositories in which t	STATE ▲ ephone Number	ZIP CODE A
Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	Telest Community Bank	STATE ▲ ephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

h). <b>Joint Fundraisin</b>		FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
PALMER VICTOR	RY COMMITTEE		
Mailing Address	1919 OXMOOR ROAD		1 1 1 1 1 1 1 1 1
	#223		1 1 1 1 1 1 1 1
	HOMEWOOD	AL	35209
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		Fundraising Representa	Leadership PAC S
	y by name, address (phone number – optional)	Tunuraising Nepresent	Leadership PAC 5
esignated Agent: Identify		Tunuraising Nepresenta	Leadership PAC 5
esignated Agent: Identify			Leadership PAC 5
esignated Agent: Identify			Leadership PAC 5
esignated Agent: Identify	by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)  CITY		
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	ries: 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 Deposito afety deposit boxes or ma	ries: 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 Deposito afety deposit boxes or ma	ries: 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 Deposito afety deposit boxes or material depository, etc Ameris	ries: 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 Deposito afety deposit boxes or material depository, etc Ameris	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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Mailing Address  SUITE 10  ATHENS  Relationship:  Connected Organization  Designated Agent: Identify by name, a  Full Name  Mailing Address	CITY A  Affiliated Committee	FEC ID number FEC ID number FEC ID number FEC ID number  aising Representativ  GA  STATE  Fundraising Represent	30605
3. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.	CITY A  Affiliated Committee	FEC ID number  FEC ID number  aising Representativ	e, or Leadership PAC Spon
ATHENS Relationship:  Connected Organization  Mailing Address  SUITE 10  ATHENS  Relationship:  Connected Organization  esignated Agent: Identify by name, a  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Depositories: List all afety deposit boxes or maintains funds  ame of Bank, PNC Bank	CITY A  Affiliated Committee	FEC ID number  aising Representativ	e, or Leadership PAC Spon
REED VICTORY COMMIT  Mailing Address  Back S. M.  ATHENS  Relationship:  Connected Organization  esignated Agent: Identify by name, a  Full Name  Mailing Address  TITLE OR POSITION ▼  anks or Other Depositories: List all afety deposit boxes or maintains funds  ame of Bank, PNC Bank	CITY A  Affiliated Committee	aising Representativ	e, or Leadership PAC Spon
REED VICTORY COMMIT  Mailing Address  SUITE 10  ATHENS  Relationship:  Connected Organization  esignated Agent: Identify by name, a  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Depositories: List all afety deposit boxes or maintains funds  ame of Bank, PNC Bank	CITY A  Affiliated Committee	GA STATE A	30605
Mailing Address  SUITE 10  ATHENS  Relationship:  Connected Organization  resignated Agent: Identify by name, a  Full Name  Mailing Address  TITLE OR POSITION ▼  Fanks or Other Depositories: List all afety deposit boxes or maintains funds  lame of Bank, PNC Bank	CITY A  Affiliated Committee	STATE ▲	ZIP CODE A
Mailing Address  SUITE 10  ATHENS  Relationship:  Connected Organization  esignated Agent: Identify by name, a  Full Name  Mailing Address  TITLE OR POSITION ▼  anks or Other Depositories: List all afety deposit boxes or maintains funds  ame of Bank, PNC Bank	CITY A  Affiliated Committee	STATE ▲	ZIP CODE A
Relationship:  Connected Organization  esignated Agent: Identify by name, a  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Depositories: List all afety deposit boxes or maintains funds  ame of Bank, PNC Bank	Affiliated Committee X Joint	STATE ▲	ZIP CODE A
esignated Agent: Identify by name, a Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositories: List all afety deposit boxes or maintains funds  ame of Bank, PNC Bank	Affiliated Committee X Joint		
esignated Agent: Identify by name, a  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Depositories: List all afety deposit boxes or maintains funds  ame of Bank, PNC Bank		Fundraising Represent	ative Leadership PAC Sp
TITLE OR POSITION ▼  anks or Other Depositories: List all afety deposit boxes or maintains funds  ame of Bank, PNC Bank			
TITLE OR POSITION ▼  anks or Other Depositories: List all afety deposit boxes or maintains funds ame of Bank, PNC Bank			
TITLE OR POSITION ▼  anks or Other Depositories: List all afety deposit boxes or maintains funds ame of Bank, PNC Bank			
anks or Other Depositories: List all afety deposit boxes or maintains funds ame of Bank, PNC Bank			
afety deposit boxes or maintains funds ame of Bank, PNC Bank	CITY ▲	STATE ▲	ZIP CODE ▲
afety deposit boxes or maintains funds ame of Bank, PNC Bank		elephone Number	
Mailing Address 2 North 2nd		the committee deposi	ts funds, holds accounts, rent
Harrisburg			

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraisi	ng Representative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 26141		
		ALEXANDRIA	VA	22313
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	ndraising Representa	ative Leadership PAC Sponsor
8.	Pull Name	by name, address (phone number – optional)	1 1 1 1 1 1	
	Mailing Address	1		
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	•		ZIP CODE A
	Banks or Other Depositor safety deposit boxes or ma	Teleph	STATE ▲	
	Banks or Other Depositor safety deposit boxes or matching boxes or matching by the Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.	STATE ▲	
	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds.  ank & Trust	STATE ▲	
	Banks or Other Depositor safety deposit boxes or matching boxes or matching by the Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.  ank & Trust  909 Poydras Street	STATE Anone Number committee deposit	s funds, holds accounts, rents
	Banks or Other Depositor safety deposit boxes or matching boxes or matching by the Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.  ank & Trust	STATE ▲	

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundrais</b>	ing Participant:			
1			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
	=		aising Representativ	e, or Leadership PAC Sponsor
FRIENDS OF AI	NDY BARR COMMI			
Mailing Address	332 W. LEE HIGHWAY			
	#303			
	WARRENTON		VA VA	20186
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliat	ted Committee X Joint	Fundraising Represent	ative Leadership PAC Spon
Full Name	ify by name, address (phor			
TITLE OR POSITIO	(	CITY A	STATE A	ZIP CODE ▲
THEE OIL FOOTIO				
		Te	lephone Number	
Banks or Other Deposit safety deposit boxes or r	tories: List all banks or oth		lephone Number	ts funds, holds accounts, rents
Banks or Other Deposits safety deposit boxes or responsible to the Name of Bank, Depository, etc.	tories: List all banks or oth naintains funds.  Son Bank  1 S. Main Streeet		the committee deposit	
Banks or Other Deposits safety deposit boxes or responsible to the Name of Bank, Depository, etc.	tories: List all banks or oth naintains funds.		lephone Number	is funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

y) or (h). Joint Fundraisi	ing Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected MAST VICTORY	d Organization, Affiliated Committee, Joint Fundra COMMITTEE	aising Representative	e, or Leadership PAC Sponsor
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Joint  ify by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sponso
Full Name			
Mailing Address			
Mailing Address			
Mailing Address			
Mailing Address  TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	N ▼ CITY ▲		
TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or m	CITY ▲  Tel  cories: List all banks or other depositories in which t	STATE ▲	ZIP CODE A
Banks or Other Deposit safety deposit boxes or many Depository, etc.	CITY ▲  Tel  cories: List all banks or other depositories in which to the naintains funds.  S Capital Bank  201 W. 5th Street	STATE ▲	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisi</b> n	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
WIRE ROGERS V			
Mailing Address	2523 WILSON BOULEVARD		
	#4 ARLINGTON		22201
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Spon
Full Name			
	CITY ▲	STATE A	ZIP CODE ▲
TITLE OR POSITION		Telephone Number	
Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.  Mailing Address		ch the committee deposit	ts funds, holds accounts, rents
	Old Bridge	NJ NJ	08857

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisir</b>	ng Participant:			
1			FEC ID number	С
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
Name of Any Connected	_	ated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 420521			
	ATLANTA		GA	30342
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization	Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponso
Full Name				
	1			
		CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	<b>□</b>	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION		1		ZIP CODE <b>A</b>
Banks or Other Depositor safety deposit boxes or ma	pries: List all banks	1	STATE ▲	
Banks or Other Deposito safety deposit boxes or management of Bank, North	ories: List all banks aintains funds.	Te	STATE ▲	
Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	pries: List all banks a aintains funds.  Rim Bank  P.O. Box 241489	Te	STATE ▲	
Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ories: List all banks aintains funds.  Rim Bank	Te	STATE ▲	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraising</b>	Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundrai	sing Representative	, or Leadership PAC Sponsor
	BUDD VICTORY			
		PO BOX 97275		ı
	Mailing Address			
				07704
		RALEIGH	L NC	27624
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	. J			
		CITY A		
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ies: List all banks or other depositories in which the ntains funds.	ne committee deposits	s funds, holds accounts, rents
		's United Bank		
	Depository, etc.			
	Mailing Address	14 S. Moger Avenue		
		14 S. Moger Avenue		
		14 S. Moger Avenue  Mt. Kisco	NY	10549

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID numbe	er C
2.		   FEC ID numbe	er C
3.		   FEC ID numbe	er C
4.		   FEC ID numbe	er C
4.			
Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representa	ative, or Leadership PAC Sponsor
FERGUSON VIC	TORY FUND		
Mailing Address	P.O. BOX 420304		
	ATLANTA	GA	30342
Relationship:	CITY A	STATE	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Joint Fundraising Repres	entative Leadership PAC Sponso
Pull Name	fy by name, address (phone number – option	al)	
Mailing Address			
			1 1
TITLE OR POSITION	CITY ▲	STATE 4	ZIP CODE ▲
TITLE OR POSITION		Telephone Number	
Ranks or Other Democits			
safety deposit boxes or m	ories: List all banks or other depositories in value aintains funds.	which the committee dep	osits funds, holds accounts, rents
Name of Bank, Depository, etc.	aintains funds.	which the committee dep	osits funds, holds accounts, rents
safety deposit boxes or m	aintains funds.  cle Bank	which the committee dep	osits funds, holds accounts, rents
Name of Bank, Depository, etc.	aintains funds.  cle Bank		
Name of Bank, Depository, etc.	aintains funds.  cle Bank  4328 Harding Pike	which the committee dep	37205

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisi</b> n	g Participant:	
	1		FEC ID number C
	2.		FEC ID number C
	3.		FEC ID number
	4.		FEC ID number C
6.	Name of Any Connected  Davidson Victory	_	draising Representative, or Leadership PAC Sponsor
	Mailing Address	499 S. Capitol Street SW	
		Suite 407 Washington	, DC , 20003
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
			nt Fundraising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	y by name, address (phone number – optional)	
	Mailing Address		
	TITLE OR POSITION	CITY A	STATE ▲ ZIP CODE ▲
		1	Telephone Number
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.  unties Bank 210 N. Tehama	h the committee deposits funds, holds accounts, rents
		Willows	CA   95988
		CITY A	STATE ▲ ZIP CODE ▲

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h). <b>Joint Fundrais</b> ii	g Participant:			
1.		FEC ID r	number	C
2.		FEC ID r	number	C
3.		FEC ID r	number	C
4.		FEC ID r	number	C
ame of Any Connected	Organization, Affiliated Committee, Joi	nt Fundraising Repre	sentative,	or Leadership PAC Spon
CRAMER VICTO	RY FUND			
1				
Mailing Address	PO BOX 26141			
	1			
	ALEXANDRIA	1	VA I	22313
Relationship:	CITY A		STATE A	ZIP CODE A
	0111 =		/// <u> </u>	211 0002 2
	d Organization Affiliated Committee  y by name, address (phone number – op	Joint Fundraising F	Representati	ve Leadership PAC Sp
	_		Representati	ve Leadership PAC Sp
esignated Agent: Identif	_		Representati	ve Leadership PAC Sp
esignated Agent: Identif	_		Representati	ve Leadership PAC Sp
esignated Agent: Identif	_		Representati	ve Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – op	tional)	Representati	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – op	tional)	ATE A	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – op	tional)  ST  Telephone Num	ATE Anber	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – op	tional)  ST  Telephone Num	ATE Anber	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and mailing and mailing and mailing Address	y by name, address (phone number – op	tional)  ST  Telephone Num	ATE Anber	ZIP CODE A
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 – op  CITY   ries: List all banks or other depositories aintains funds.	tional)  ST  Telephone Num	ATE Anber	ZIP CODE A
esignated Agent: Identification Full Name	ries: List all banks or other depositories aintains funds.  gton National Bank	tional)  ST  Telephone Num	ATE Anber	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	ries: List all banks or other depositories aintains funds.  gton National Bank	tional)  ST  Telephone Num	ATE Anber	ZIP CODE A

FEC Form 1S (Revised 02/2017)

- ( . )	(I) Island Franchista	- Postistand		
o(g)	or(h). <b>Joint Fundraisin</b>	g Participant:	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
3.		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	228 S. Washington Street		
		Suite 115		
		Alexandria	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		1	ephone Number	
).	Banks or Other Depositor	item List all hanks or other depositories in which t		
	Name of Bank, US Bar	intains funds.	he committee deposits	s funds, holds accounts, rents
		intains funds.	he committee deposits	s funds, holds accounts, rents
	Name of Bank, US Bar Depository, etc.	intains funds. nk	he committee deposits	s funds, holds accounts, rents
	Name of Bank, US Bar Depository, etc.	intains funds. nk	he committee deposits	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
4.			
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
JAKE ELLZEY V	ICTORY FUND		
Mailing Address	PO BOX 30844		
Maining / Idanose			
	BETHESDA	ı ı MD ı	20824
Dalatianahin			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee   Affiliated Committee     Join  fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi			Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
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  anks or Other Deposite afety deposit boxes or management and ame of Bank, Amari	fy by name, address (phone number – optional)  CITY   CITY   Tries: List all banks or other depositories in which aintains funds.  Ilo National Bank	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 ame of Bank, Amari	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identi  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   Tries: List all banks or other depositories in which aintains funds.  Ilo National Bank	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   Tries: List all banks or other depositories in which aintains funds.  Ilo National Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page 40 of 189

N 	ICFL				Jicociitative	e, or Leaders	ship PAC Sponso
	Mailing Address	824 S MILLEDGE	E AVE STE 101				
		ATHENS		1	GA	30605	1–1
	Relationship:		CITY A		STATE A		ZIP CODE ▲
	Connected	I Organization	Affiliated Committee	<b>X</b> Joint Fundraisin	g Representa	tive Le	adership PAC Spor
	Full Name						
	Mailing Address	1					
ľ	Mailing Address						
ľ	Mailing Address						
	Mailing Address  TITLE OR POSITION		CITY A		STATE A	Z	IP CODE A

FEC Form 1S (Revised 02/2017)

Page 41 of 189

h). <b>Joint Fundraisi</b>	ig 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 Fundr	aising Representative	e, or Leadership PAC Spon
GARRET GRAVE	ES VICTORY FUND		
1			
Mailing Address	PO BOX 64845		
	BATON ROUGE	LA L	70896
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
			_
	Affiliated Committee Joint  Ty by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	by by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and ma	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and ma	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, Chain	y by name, address (phone number – optional)  CITY   CITY   Te  pries: 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 mame of Bank, epository, etc	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  Bridge Bank	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, Chain epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  Bridge Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundrais</b> i	ng Participant:			
1.			FEC ID number	С
2.			FEC ID number	C
3.			FEC ID number	С
4			FEC ID number	С
	=	Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
RUTHERFORD	TICTORY FUND			
Mailing Address	3030 HARTLEY RD			
	STE 120			
	JACKSONVILLE		FL L	32257
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affilia	ated Committee X Joint	Fundraising Represent	ative Leadership PAC Spons
Pull Name Mailing Address	y by name, address (pnd	ne number – optional)		
. J				
			1 1 1	
TITLE OR POSITION	<b> </b>	CITY A	STATE ▲	ZIP CODE 🛦
TITLE OR POSITION	<b>↓</b>	ı		ZIP CODE <b>A</b>
Banks or Other Deposit safety deposit boxes or m	ories: List all banks or ot	Tel	STATE ▲ lephone Number	ZIP CODE   ZIP CODE   s funds, holds accounts, rents
Banks or Other Deposit safety deposit boxes or m  Name of Bank, Pifth  Depository, etc.	ories: List all banks or ot laintains funds.  Third Bank  P.O. Box 630900	Tel	STATE A lephone Number	s funds, holds accounts, rents
Banks or Other Deposit safety deposit boxes or m  Name of Bank, Pifth  Depository, etc.	ories: List all banks or ot laintains funds.  □ Third Bank	Tel	STATE ▲ lephone Number	

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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
Name of Any Connected FEENSTRA VICT	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 183		
	HUDSON		54016
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	d Organization Affiliated Committee	undraising Representa	tive Leadership PAC Sponsor
	y by name, address (phone number – optional)		
Full Name			
Mailing Address			
TITLE OF POSITION	CITY ▲	STATE A	ZIP CODE ▲
TITLE OR POSITION	•		
		phone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
Name of Bank, Depository, etc.	ries: List all banks or other depositories in which th aintains funds.  of Santa Clarita		s funds, holds accounts, rents
Name of Bank, Depository, etc.	ries: List all banks or other depositories in which th aintains funds.  of Santa Clarita		s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b> r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
CALVERT VICTO	ORY FUND		
1			
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
			_
	d Organization Affiliated Committee Join  y by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or marks	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material deposit boxes	y by name, address (phone number – optional)  CITY   CITY   ries: 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 material depositions, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or marks	y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which aintains funds.  Of North Georgia	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which aintains funds.  Of North Georgia	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) oı	r(h). <b>Joint Fundraisin</b> ç	g Participant:		
	1.	F	FEC ID number	С
	2	F	EC ID number	C
	3.	F	EC ID number	C
	4.	F	FEC ID number	C
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint Fundraisin	ng Representative	e, or Leadership PAC Sponsor
	Mailing Address	2900 CLEARVIEW PKWY		
		SUITE 206  METAIRIE	ı LA ı	70006
	Relationship:	CITY A	STATE A	ZIP CODE ▲
			draising Representa	
8. I	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Teleph	one Number	
_				
;	safety deposit boxes or mai		committee deposit	s funds, holds accounts, rents
; !	safety deposit boxes or mai		committee deposit	s funds, holds accounts, rents
; !	safety deposit boxes or main	intains funds.	committee deposit	s funds, holds accounts, rents
; !	Name of Bank, Depository, etc.	intains funds.  f America	committee deposit	s funds, holds accounts, rents
; !	Name of Bank, Depository, etc.	intains funds.  f America	committee deposit	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisi</b> n	g Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
Mailing Address	1818 MILTON AVE		
	#1448 JANESVILLE	, , , wi	53545
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sponso
Full Name			
	CITY ▲	STATE A	ZIP CODE A
TITLE OR POSITION	1	elephone Number	
Banks or Other Depositors safety deposit boxes or many safety deposit boxes or many safety depository, etc.  Mailing Address		the committee deposit	s funds, holds accounts, rents
	Atlanta	GA _	30302
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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(h). <b>Joint Fundraisin</b>	·		0
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
TAKE BACK THE	HOUSE 2022		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824-0844
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		Fundraising Representa	Leadership PAC Sp
	by name, address (phone number – optional)		Leadership TAO O
esignated Agent: Identify			Leadership TAO O
esignated Agent: Identify  Full Name			
esignated Agent: Identify  Full Name			
esignated Agent: Identify  Full Name	by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional)  CITY   CITY   Te  ies: List all banks or other depositories in which tentains funds.  CITY Bank	STATE A lephone Number	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional)  CITY   CITY   Te  ies: List all banks or other depositories in which to intains funds.	STATE A lephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number – optional)  CITY   CITY   Te  ies: List all banks or other depositories in which tentains funds.  CITY Bank	STATE A lephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page 48 of 189

1.		FEC ID number	C
2.		FEC ID number	C
3.			
4.		FEC ID number	C
lame of Any Connecte	d Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
TAKE BACK TH	E HOUSE TEXAS 2022		
Mailing Address	PO BOX 30844		
-			
	BETHESDA	MD L	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	ed Organization Affiliated Committee Joint Joint ify by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident			
esignated Agent: Ident	ify by name, address (phone number – optional)		
resignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)		
resignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional)  CITY   CITY   Teleposites: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name  Mailing Address  TITLE OR POSITIO  anks or Other Depositatety deposit boxes or rame of Bank, Acces	ify by name, address (phone number – optional)  CITY   CITY   Teleposites: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name  Mailing Address  TITLE OR POSITIO  anks or Other Deposit afety deposit boxes or reader depository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Teleposites: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITIO  Janks or Other Depositatety deposit boxes or residue.	ify by name, address (phone number – optional)  CITY   CITY   Teleprories: List all banks or other depositories in which naintains funds.  SS National Bank	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITIO  Janks or Other Depositatety deposit boxes or related to the property of the property of the position of the property of the position of the property of the prop	ify by name, address (phone number – optional)  CITY   CITY   Telegrates: List all banks or other depositories in which naintains funds.  SS National Bank  1800 Robert Fulton Drive	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page 49 of 189

5(g) c	or(h). <b>Joint Fundraisi</b> n	ng Participant:		
,	1.	 	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	ROGER FOR CO	NGRESS VICTORY FUND		
		10 N. CADDO ST.		
	Mailing Address			
		PMB #174		
		CLEBURNE	TX	76031
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint	Fundraising Representa	Leadership PAC Sponsor
8.	Decignated Agents Identifi	why name address (phone number antional)		
0.		y by name, address (phone number – optional)		
	Full Name			
	Mailing Address			1
	Maining / tadiooc			
	maining / ladicoc			
	maining / dalesse			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
		•		
		•	STATE A	
9.	TITLE OR POSITION  Banks or Other Deposito	Tes: List all banks or other depositories in which	STATE A	ZIP CODE ▲
9.	TITLE OR POSITION  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.	TITLE OR POSITION  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 ▲

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
7-			
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Chris Stewart Fre	eedom Fund		
Mailing Address	610 S. BOULEVARD		
Mailing Address			
	TAMPA	, , FL ,	33606
Relationship:	CITY <b>A</b>	STATE ▲	ZIP CODE A
riciationship.			
Connecte esignated Agent: Identi	Affiliated Committee	t Fundraising Representa	tive Leadership PAC Sp
esignated Agent: Identi			
esignated Agent: Identi	fy by name, address (phone number – optional)		
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  anks or Other Deposite afety deposit boxes or mailing and mailing	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identii  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   Te  pries: List all banks or other depositories in which aintains funds.  nunity Bank of Mississippi  2441 Old Brandon Road	STATE A elephone Number the committee deposit	ZIP CODE A  s funds, holds accounts, rent
esignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  CITY Bank of Mississippi	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

g) or (h).	t Fundraising	Participant:													
1.			1 1 1				FEC	ID nun	nber	С					
2.			1			J	FEC	ID nun	ber	С					
3.						_	FEC	ID nun	nber	С					
4.						_ 	FEC	ID nun	nber	С					
	Connected Or	rganization, Affi	iliated Co	mmittee,	Joint F	undrai	sing F	Represe	ntative	e, or L	.eader	ship	PAC	Spo	nsor
Mailing A	ddress	P.O. Box 30844													
	ļ	Bethesda						- 1	4D ,		20824				
Relations		Bernesua							1D	L	20024		_ -	· .	
Relations	hip:		Ci	TY 🛦				SIA	TE 🔺			ZIP	COD	E 🔺	
	Connected C	Organization	Affiliated	Committee	<b>x</b>	Joint F	undrais	sing Rep	resenta	ative	L	eader	ship F	PAC S	Sponso
[		Organization  y name, addres			-		Fundrais	sing Rep	resenta	ative	L	eader	ship F	PAC S	Sponso
Designated Ag	gent: Identify b				-		undrais	sing Rep	resenta	ative		eader	ship F	PAC S	Sponso
Designated Ag Full Name	gent: Identify b				-		- Fundrais	sing Rep	resenta	ative		eader	ship F	PAC S	Sponso
Designated Ag Full Name	gent: Identify b		s (phone	number –	option	al)			resenta						
Designated Ag Full Name Mailing Add	gent: Identify b	y name, addres	s (phone	number –	option	al)									
Designated Ag Full Name Mailing Add	gent: Identify b	y name, addres	s (phone	number –	option	al)									
Designated Ag Full Name Mailing Add	gent: Identify b	y name, addres	s (phone  CIT	number –	optiona	Tele	ephone	STATI				L L L L L L L L L L L L L L L L L L L			
Full Name Mailing Add  TITLE OR  Banks or Othe safety deposit  Name of Bank, Depository, etc	gent: Identify b	y name, addres	s (phone  CIT's or other	number –	optiona	Tele	ephone	STATI				L L L L L L L L L L L L L L L L L L L			
Full Name Mailing Add  TITLE OR  Banks or Othe safety deposit  Name of Bank,	gent: Identify b  dress  R POSITION   er Depositorie boxes or maint  First Cap  Address	y name, addres  y name, addres  s: List all banks tains funds.	s (phone  CIT's or other	number –	optiona	Tele	ephone	STATI				L L L L L L L L L L L L L L L L L L L			
Full Name Mailing Add  TITLE OR  Banks or Othe safety deposit  Name of Bank, Depository, etc	gent: Identify b  dress  R POSITION   er Depositorie boxes or maint  , First Cap  Address	s: List all banks tains funds.  Dital Bank of the stain o	s (phone  CIT's or other	number –	optiona	Tele	ephone	STATI Numbe		s fund		L L L L L L L L L L L L L L L L L L L			

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisin			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Mailing Address	228 S. WASHINGTON STREET		
Mailing Address	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
Connected		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify		Fundraising Represente	Leadership PAC Sp
Connected esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or material deposition and the proposition of the position and the position and the position of the position and the position and the position of the position and the position of the position and the position of	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.  Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page  $\underline{^{53}}$  of  $\underline{^{189}}$ 

1.	ng Participant:			
1.			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
lame of Any Connected	l Organization, Affili	ated Committee, Joint Fur	ndraising Representativ	ve, or Leadership PAC Spon
TEAM MCCAUL	TEXAS VICTO	RY		
1				
Mailing Address	1005 CONGRESS	S AVE STE 400		
	1			
	AUSTIN		, TX ,	78701
Relationship:		CITY A	STATE A	ZIP CODE A
	ed Organization		pint Fundraising Represen	
esignated Agent: Identi	fy by name, address	(phone number – optional)		
	ly by hame, address	(phone number – optional)		
Full Name				
Mailing Address				
TITLE OR POSITION		CITY A	STATE ▲	ZIP CODE ▲
TITLE OR POSITION			STATE ▲ Telephone Number	

FEC Form 1S (Revised 02/2017)

r(h). <b>Joint Fundraisi</b> n	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponso
THE BERGMAN	VICTORY COMMITTEE		
Mailing Address	824 S. MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Spor
Full Name	y by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
Banks or Other Deposito safety deposit boxes or ma	<b>ries:</b> List all banks or other depositories in whi	ch the committee deposit	s funds, holds accounts, rents
Name of Bank, JP Mo Depository, etc.	rgan Chase Bank, NA		
Mailing Address	1400 Woodloch Forest Drive		
	The Woodlands	TX	L77380

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1.		FEC	ID number	C
2		FEC	ID number	С
3.		FEC	ID number	С
4.		FEC	ID number	С
lame of Any Connected	Organization, Affiliated Committee,	Joint Fundraising R	epresentativ	ve, or Leadership PAC Spons
TAKE BACK THE	HOUSE CALIFORNIA 2022	<u>)</u> -		
1				
Mailing Address	P.O. BOX 30844			
			1 1 1 1	
	BETHESDA		MD	20824
Relationship:	CITY A		STATE A	ZIP CODE A
	d Organization Affiliated Committee	Joint Fundrais	ing Represent	tative Leadership PAC Sp
esignated Agent: Identif	_	_	ng Represent	tative Leadership PAC Sp
esignated Agent: Identif	_	_	ng Represent	tative Leadership PAC Sp
esignated Agent: Identif	_	_	ng Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number –	_		
esignated Agent: Identif	y by name, address (phone number –	_	STATE A	

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8 and

Page  $\underline{^{56}}$  of  $\underline{^{189}}$ 

1			
		FEC ID number	С
ı		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected C	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
ADRIAN SMITH VI	CTORY FUND		
1			
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA I	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
Mailing Address	1		
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
1		Telephone Number	
	es: List all banks or other depositories in whic	h the committee deposit	s funds, holds accounts, rent
afety deposit boxes or main	ntains funds.	h the committee deposit	s funds, holds accounts, rent
afety deposit boxes or main ame of Bank, <sub>,</sub> <b>Fifth Th</b>		h the committee deposit	s funds, holds accounts, rent
lame of Bank, Fifth The	ntains funds.	h the committee deposit	s funds, holds accounts, rent
afety deposit boxes or mair lame of Bank, <sub>,</sub> <b>Fifth Th</b>	ntains funds. iird Bank	h the committee deposit	s funds, holds accounts, rent
afety deposit boxes or main ame of Bank, Fifth The pepository, etc.	ntains funds. iird Bank	h the committee deposit	s funds, holds accounts, rent

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisi</b>	ng Participant:			
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	C
4.			FEC ID number	C
Name of Any Connected WITTMAN VICTO	_		aising Representativ	e, or Leadership PAC Sponso
VIII TIVIAN VICTO		<u> </u>		
Mailing Address	P.O. BOX 26141			
	ALEXANDRIA		VA	22313
Relationship:		CITY A	STATE A	ZIP CODE A
	ed Organization Affi		Fundraising Represent	
Designated Agent: Identi	y by name, address (pl	hone number – optional)		
Mailing Address				
		CITY A	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	1 ▼	CITY ▲	STATE A	ZIP CODE ▲
TITLE OR POSITION	I ▼	1	STATE ▲	ZIP CODE A
	pries: List all banks or		elephone Number	ZIP CODE ▲
Banks or Other Deposite safety deposit boxes or m	pries: List all banks or		elephone Number	
Banks or Other Deposite safety deposit boxes or m	ories: List all banks or aintains funds.		elephone Number	
Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or aintains funds.		elephone Number	
Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or aintains funds.		elephone Number	

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h). <b>Joint Fundraisi</b>	ng 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 Fundr	raising Representative	e, or Leadership PAC Spon
BUCSHON VICT	ORY COMMITTEE		
I			
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, ,   VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
riolationionip.	511 <b>–</b>		
Connecte		Fundraising Representa	ative Leadership PAC S
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representation	Leadership PAC S
Connecte	ed Organization Affiliated Committee	Fundraising Representation	Leadership PAC S
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representation	
Connecte esignated Agent: Identif	Affiliated Committee  Y Joint  Ty by name, address (phone number – optional)		
Connecte esignated Agent: Identif	Affiliated Committee  Affiliated Committee  Y Joint  To be a committee of the committee of	Fundraising Representation	
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee  Affiliated Committee  Y Joint  Ty by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee  Affiliated Committee  Y Joint  Ty by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite  afety deposit boxes or magnetic depositions.	Affiliated Committee  Affiliated Committee  To pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite  afety deposit boxes or magnetic depositions.	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
connected esignated Agent: Identification of the position of t	Affiliated Committee  Affiliated Committee  To pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, Towne	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Connected esignated Agent: Identification of the position of t	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which aintains funds.	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	C
	2.		FEC ID number	C
	3		FEC ID number	C
	4		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundral	ising Representative	, or Leadership PAC Sponsor
	BALDERSON VIC	TORY COMMITTEE		
	Mailing Address	P.O. BOX 26141		
		ALEXANDRIA	VA _	22313
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number - optional)		
3.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
3.		by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	CITY	STATE A	ZIP CODE A
3.	Full Name	CITY		
3.	Full Name   _   _	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE A	ZIP CODE A
3.	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE A	ZIP CODE A
3.	Full Name	CITY   CITY   Tele  ries: List all banks or other depositories in which the intains funds.	STATE A	ZIP CODE A
3.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or matching boxes or matching between the pository, etc.	CITY   CITY   Tele  ries: List all banks or other depositories in which the intains funds.  tate Bank	STATE A	ZIP CODE A
3.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or matching boxes or matching between the pository, etc.	CITY   CITY   Tele  ries: List all banks or other depositories in which the intains funds.  tate Bank	STATE A	ZIP CODE A

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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	C
		rganization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
At L	RRINGTON VICT	ORY COMMITTEE		
	Mailing Address	228 S. WASHINGTON STREET		
	Mailing Address	SUITE 115		
		ALEXANDRIA	, VA	, 22314
	Deletienshin			
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	undraising Representa	ative Leadership PAC Sponsor
	gnated Agent: Identify I	by name, address (phone number – optional)		
F		by name, address (phone number – optional)		
F	ull Name	by name, address (phone number – optional)		
F	ull Name	py name, address (phone number – optional)		
Fi	full Name	CITY	STATE A	ZIP CODE A
Fi	ull Name	CITY A	STATE A	
Fi	full Name	CITY A	1	
9. <b>Bank</b>	full Name	CITY   Tele	phone Number	ZIP CODE 🛦
9. <b>Bank</b>	TITLE OR POSITION  s or Other Depositoric deposit boxes or main	CITY   CITY   Tele  Ses: List all banks or other depositories in which the stains funds.	phone Number	ZIP CODE 🛦
9. <b>Bank</b> safety	TITLE OR POSITION  s or Other Depositoric deposit boxes or main	CITY   Tele	phone Number	ZIP CODE 🛦
9. <b>Bank</b> safety	TITLE OR POSITION To the control of	CITY   CITY   Tele  Ses: List all banks or other depositories in which the stains funds.	phone Number	ZIP CODE 🛦
9. <b>Bank</b> safety	TITLE OR POSITION  s or Other Depositoric deposit boxes or main e of Bank, Sitory, etc.	CITY   CITY   Tele  Ses: List all banks or other depositories in which the stains funds.  mmunity Credit Union	phone Number	ZIP CODE 🛦
9. <b>Bank</b> safety	TITLE OR POSITION  s or Other Depositoric deposit boxes or main e of Bank, Sitory, etc.	CITY   CITY   Tele  Ses: List all banks or other depositories in which the stains funds.  mmunity Credit Union	phone Number	ZIP CODE 🛦

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). Joint Fundraising	Participant:			
1.		FE0	C ID number	C
2.		FE0	C ID number	C
3.		FE(	C ID number	С
4		FEO	C ID number	С
=	Organization, Affiliated Committee, Jo	int Fundraising	Representative	e, or Leadership PAC Spo
GREG PENCE VI	CTORY			
Mailing Address	P.O. BOX 275			
	TAYLORSVILLE		_ IN	47280
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	<b>✗</b> Joint Fundra	ising Representa	ative Leadership PAC S
	Organization Affiliated Committee  by name, address (phone number – op		ising Representa	Leadership PAC S
esignated Agent: Identify			ising Representa	Leadership PAC S
signated Agent: Identify  Full Name			ising Representa	Leadership PAC S
signated Agent: Identify  Full Name		otional)		Leadership PAC S
Full NameMailing Address	by name, address (phone number – op	otional)		
signated Agent: Identify  Full Name	by name, address (phone number – op	otional)		
Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or mailume of Bank, Empire	by name, address (phone number – or control of the	otional)  Telephon	STATE A e Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main the pository, etc.	by name, address (phone number – or compared to the compared t	otional)  Telephon	STATE A e Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or mailume of Bank, Empire	by name, address (phone number – or control of the	otional)  Telephon	STATE A e Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main the pository, etc.	by name, address (phone number – or control of the	otional)  Telephon	STATE A e Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraising</b>	n 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 Fundrai	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	370 EAST SOUTH TEMPLE SUITE 580		
	SALT LAKE CITY	UT	84111
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	undraising Representa	tive Leadership PAC Sponso
Full Name	<u> </u>		
	CITY ▲	STATE A	ZIP CODE A
TITLE OR POSITION	▼	OIAIE A	211 OODL <b>2</b>
	Tele	phone Number	
safety deposit boxes or mai	gton Bank	e committee deposits	s funds, holds accounts, rents
Mailing Address	1901 Breton Road SE		
	Grand Rapids	MI	49506

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g) or (h). <b>Joint</b>	Fundraising	Participant:									
1					FI	EC ID numbe	er C				
2.					FI	EC ID numbe	er C				
3.					_   FI	EC ID numbe	er C				
4.					_ Fi	EC ID numbe	er C				
	Connected O	rganization, Aff	iliated Commit	tee, Joint F	undraisin	g Representa	tive, o	· Leader	ship P	PAC Sp	oonsor
Mailing A	Address	9460 TEGNER	ROAD								
		· · · · · · · · · · · · · · · · · · ·				CA		05224			
<b>-</b>		HILMAR				CA		95324			
Relations	ship:		CITY A	_		STATE	•		ZIP C	ODE A	<b>A</b> .
	Connected C	Jigarii Zation	Affiliated Comr		001111 1 41.4	raising Repres	Oi itati v S	_	cuuc.c.	iip	Sponso
Designated Ag	gent: Identify b	y name, addres	s (phone numb	er – optiona	1)						
Designated Ag	gent: Identify b	y name, addres	ss (phone numb	er – optiona	<b>I)</b>						
		y name, addres	s (phone numb	er – optiona	l)						
Full Name		y name, addres	ss (phone numb	er – optiona	i)						
Full Name			es (phone numb							  -	
Full Name Mailing Add	dress					STATE			ZIP CO		
Full Name Mailing Add						STATE A					
Full Name Mailing Add	er Depositorie boxes or main	s: List all bankstains funds. Union Bank	CITY A		Telepho	one Number			ZIP CO	DE A	
Full Name  Mailing Add  TITLE OR  Banks or Other safety deposit I	POSITION Per Depositorie boxes or maint	s: List all bankstains funds.	CITY A		Telepho	one Number			ZIP CO	DE A	
Full Name  Mailing Add  TITLE OR  Banks or Other safety deposit It  Name of Bank, Depository, etc.	er Depositorie boxes or maint	s: List all bankstains funds. Union Bank	CITY A		Telepho	one Number			ZIP CO	DE A	
Full Name  Mailing Add  TITLE OR  Banks or Other safety deposit It  Name of Bank, Depository, etc.	er Depositorie boxes or maint	s: List all banks tains funds.  Union Bank	CITY A		Telepho	one Number	osits fu		ZIP CO	DDE A  Dounts,	

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h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spor
WALBERG WINN	ING UNDER THE OAKS		
Mailing Address	2870 DOBIE ROAD		
	MASON	MI	48854
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Cannaataa	Organization Affiliated Committee	nt Fundraining Danragant	ativa Landarahin DAC C
		nt Fundraising Represent	Leadership PAC S
	Organization Affiliated Committee Joi  by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC S
		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identify		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identify		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identify			Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)  CITY		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or ma	by name, address (phone number – optional)  CITY   CITY   ies: List all banks or other depositories in whice intains funds.	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor aftety deposit boxes or material depository, etc.	by name, address (phone number – optional)  CITY   CITY   ies: List all banks or other depositories in whice intains funds.	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or ma	by name, address (phone number – optional)  CITY   CITY   ies: List all banks or other depositories in whice intains funds.  Bank	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor dety deposit boxes or main arms of Bank, Capital epository, etc.	by name, address (phone number – optional)  CITY   CITY   ies: List all banks or other depositories in whice intains funds.  Bank	STATE A Telephone Number	ZIP CODE A

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Page <u>65</u> **of** <u>189</u>

n). <b>Joint Fundraising</b>	Participant:		0
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spor
STAUBER VICTO	RY FUND		
Mailing Address	332 W. LEE HIGHWAY		
	#303		
	WARRENTON	VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee X Join		ative   Leadership PAU 8
esignated Agent: Identify	by name, address (phone number – optional)	nt Fundraising Representa	Ative Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional)	I randalong rioprosona	Leadership PAC S
	by name, address (phone number – optional)		Leadersnip PAC S
Full Name	by name, address (phone number – optional)		Leadersnip PAC S
Full Name	by name, address (phone number – optional)		Leadership PAC S
Full Name	CITY A		
Full Name	CITY		
Full Name Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main arme of Bank, Classic	CITY A  Ces: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main fety deposit boxes or main fety depository, etc.	CITY   CITY   ies: List all banks or other depositories in which ntains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main arme of Bank, Classic	CITY   CITY   Ges: List all banks or other depositories in which nations funds.  City Bank	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main fety deposit boxes or main fety depository, etc.	CITY   CITY   Ges: List all banks or other depositories in which nations funds.  City Bank	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra		or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representat	ive Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tel	ephone Number	
9.	safety deposit boxes or ma		he committee deposits	funds, holds accounts, rents
	Name of Bank, Flushin	id Bank		
	Name of Bank, Flushin Depository, etc.	g Bank		
		IG Bank		
	Depository, etc.	1044 William Floyd Parkway		
	Depository, etc.		NY	11967

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

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h). <b>Joint Fundraisi</b>	1	EEC ID number	C
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
WATKINS VICTO	DRY COMMITTEE		
Mailing Address	PO BOX 30844		
	BETHESDA	, , , , MD ,	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC S
	fy by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representation	Leadership PAC S
esignated Agent: Identi		Fundraising Representation	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY   CITY	Fundraising Representation	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te  pries: 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 mane of Bank, First (	fy by name, address (phone number – optional)  CITY   CITY   Te  pries: 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 mane of Bank, First (	fy by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	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   Te  pries: List all banks or other depositories in which aintains funds.  Citizens Bank	STATE A	ZIP CODE A
esignated Agent: Identi  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   Te  pries: List all banks or other depositories in which aintains funds.  Citizens Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
DAN CRENSHAW	V VICTORY COMMITTEE		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
Full Name	y by name, address (phone number – optional)		
Mailing Address			
	1		1
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	•	STATE ▲	ZIP CODE A
anks or Other Depositor affety deposit boxes or ma	ries: List all banks or other depositories in which	elephone Number	
anks or Other Depositor affety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	elephone Number	
anks or Other Depositor affety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	elephone Number	
anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	ries: List all banks or other depositories in which aintains funds.	elephone Number	
anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	ries: List all banks or other depositories in which aintains funds.	elephone Number	

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected DUNN VICTORY	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	12176 CHANCERY STATION CIR		
	RESTON	VA VA	20190
	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connected		t Fundraising Represent	ative Leadership PAC Spo
Connected  Connected  Connected  Connected  Connected	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name  Mailing Address	Affiliated Committee  y by name, address (phone number – optional)  CITY		
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito  afety deposit boxes or mail  Name of Bank, Depository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  To  ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

TITLE OR POSITION	ries: List all bank	CITY   cs or other depositories in wh	STATE A  Telephone Number  ich the committee depo	ZIP CODE   ZIP CODE   sits funds, holds accounts, rents
TITLE OR POSITION  Banks or Other Depositor  Banks of Bank, Depository, etc.	ries: List all bank		Telephone Number	
TITLE OR POSITION  Banks or Other Depositor  Banks of Bank, Depository, etc.	ries: List all bank		Telephone Number	
TITLE OR POSITION  Banks or Other Depositor cafety deposit boxes or management of Bank,	ries: List all bank		Telephone Number	
TITLE OR POSITION	ries: List all bank		Telephone Number	
TITLE OR POSITION			Telephone Number	
	<b>V</b>	CITY A		ZIP CODE A
	<u> </u>	CITY A	STATE A	ZIP CODE ▲
<u> </u>		<u> </u>		
<b>3</b>				 
3				
Mailing Address				
Full Name				
Designated Agent: Identify	/ by name, addre	ss (phone number – optional	)	
Connected	d Organization	Affiliated Committee	loint Fundraising Represe	ntative Leadership PAC Spo
Relationship:		CITY A	STATE A	▲ ZIP CODE ▲
	JACKSON	1 1 1 1 1 1 1 1 1	MS	39201
Mailing Address	120 N CONGR	RES ST STE 300		
GUEST MAJORIT	_			
Name of Any Connected	Organization, Af	filiated Committee, Joint Fu	ndraising Representat	ive, or Leadership PAC Spons
4.			FEC ID number	C
1			FEC ID number	C
3.			FEC ID number	C

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
Mailing Address	499 SOUTH CAPITOL STREET SW		
	#407		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	y by name, address (phone number – optional)		
esignated Agent: Identi	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	by by name, address (phone number – optional)		
Full Name	CITY	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 fety 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, epository, 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 Lines

1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
LATTA VICTORY	FUND		
Mailing Address	9856 ARCHER LANE		
	DUBLIN	OH	43017
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC S
Connected		Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representation	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representation	Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	d Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
Connected esignated Agent: Identify Full Name	Affiliated Committee  y by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Te	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8 at

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
GONZALEZ VICT	TORY FUND		
1			
Mailing Address	9856 ARCHER LANE		
	DUBLIN	OH	43017
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
		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		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	st 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   Tories: 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 m	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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 of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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   Tories: 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   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b> r	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	raising Representative	e, or Leadership PAC Spon
BUCKEYE VICTO	)RY FUND		
	<u> </u>		
Mailing Adalys	499 SOUTH CAPITOL STREET SW		
Mailing Address	407		
			20002
	WASHINGTON	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  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 Deposited afety deposit boxes or mails are of Bank,	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  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 material depositions, epository, etc.	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). <b>Joint Fundraising</b>	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	NDSTRONG			
	Mailing Address	1515 BURNT BOAT DR NUM 112		
		BISMARCK	ND ND	58503
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name			
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		
	Full Name Mailing Address  TITLE OR POSITION	CITY   CITY   Tele  es: List all banks or other depositories in which the	STATE ▲	ZIP CODE 🛦
9.	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositorisafety deposit boxes or mail  Name of Bank, Depository, etc.	CITY   CITY   Tele  es: List all banks or other depositories in which the	STATE ▲	ZIP CODE 🛦
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositorisafety deposit boxes or mail  Name of Bank, Depository, etc.	CITY   CITY   Tele  es: List all banks or other depositories in which the	STATE ▲	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). <b>Joint Fundraisin</b> g	g Participant:	
	1.		FEC ID number
	2.		FEC ID number
	3.		FEC ID number
	4.		FEC ID number
6.	Name of Any Connected		sing Representative, or Leadership PAC Sponsor
	Mailing Address	PO BOX 2404	
		COOKEVILLE	TN 38502
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fu	undraising Representative Leadership PAC Sponso
0			
0.	Designated Agent: Identify	by name, address (phone number - optional)	
0.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)	
Ο.		by name, address (phone number – optional)	
8.	Full Name	by name, address (phone number – optional)	
о.	Full Name		STATE A ZIR CODE A
0.	Full Name	CITY A	STATE A ZIP CODE A
o.	Full Name	CITY A	
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank,	CITY   CITY   Telepties: List all banks or other depositories in which the	STATE   ZIP CODE   phone Number
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank, Depository, etc.	CITY   CITY   Telepties: List all banks or other depositories in which the	STATE   ZIP CODE   phone Number
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank,	CITY   CITY   Telepties: List all banks or other depositories in which the	STATE   ZIP CODE   phone Number
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank, Depository, etc.	CITY   CITY   Telepties: List all banks or other depositories in which the	STATE   ZIP CODE   phone Number
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank, Depository, etc.	CITY   CITY   Telepties: List all banks or other depositories in which the	STATE   ZIP CODE   phone Number

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	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	why same address (shape number continual		
	y by name, address (phone number – optional	)	
Designated Agent: Identif	y by name, address (phone number – optional		
Designated Agent: Identif	y by name, address (phone number – optional		
Designated Agent: Identif	y by name, address (phone number – optional		
Designated Agent: Identif	CITY A	STATE A	ZIP CODE A
Designated Agent: Identif  Full Name  Mailing Address	CITY A		ZIP CODE A
Designated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION	CITY A  pries: List all banks or other depositories in wh	STATE A Telephone Number	
Pesignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or make the period of Bank, Depository, etc.	CITY A  pries: List all banks or other depositories in wh	STATE A Telephone Number	

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
<u>-</u>	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
TEAM TIMMONS			
	228 S. WASHINGTON ST.		
Mailing Address	STE. 115		
	ALEXANDRIA	L VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
Connected		nt Fundraising Represent	ative Leadership PAC Sp
Connected esignated Agent: Identify	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Affiliated Committee	nt Fundraising Represent	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee   Join  y by name, address (phone number – optional)	nt Fundraising Represent	
Connected esignated Agent: Identify Full Name	Affiliated Committee		
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposit boxes or material deposit boxes are deposited.	Affiliated Committee  y Join  y by name, address (phone number – optional)  CITY  CITY  ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee  y Join  y by name, address (phone number – optional)  CITY  CITY  ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y Join  y by name, address (phone number – optional)  CITY  CITY  ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee  y Join  y by name, address (phone number – optional)  CITY  CITY  ries: List all banks or other depositories in which	STATE A Telephone 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	0 number	C	
2. [			FEC ID	0 number	С	
3. 🗆			FEC ID	0 number	С	
4. [			FEC II	0 number	С	
	of Any Connected 0	Organization, Affiliated Committee, Jo	int Fundraising Rep	oresentative	e, or Leadership	o PAC Sponsor
N	Mailing Address	PO BOX 21097				
		HOT SPRINGS	1 1 1 1 1	AR	71903	-
R	Relationship:	CITY ▲		STATE ▲	ZIF	CODE A
	ated Agent: Identify I	by name, address (phone number – op	otional)			
		1				
Mai	iling Address					
TIT	TLE OR POSITION \	CITY ▲		STATE A	ZIP (	CODE A
			Telephone N	umber		
safety of Name of Deposit	deposit boxes or mair	es: List all banks or other depositories ntains funds.	in which the commi	ttee deposit	s funds, holds a	ccounts, rents
	Mailing Address					
	Mailing Address					

FEC Form 1S (Revised 02/2017)

(g) or (h)	). Joint Fundraising	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	me of Any Connected (	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
L				
	Mailing Address	824 S MILLEDGE AVE, STE 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponso
. De:	signated Agent: Identify	by name, address (phone number - optional)		
. Des	signated Agent: Identify  Full Name	by name, address (phone number – optional)		
. Des		by name, address (phone number – optional)		
. De	Full Name	by name, address (phone number – optional)		
. De	Full Name	by name, address (phone number – optional)		
. De	Full Name	CITY	STATE A	ZIP CODE A
. Des	Full Name	CITY A		
. <b>Ba</b> saf	Full Name	CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
. <b>Ba</b> saf	Full Name Mailing Address  TITLE OR POSITION  nks or Other Depositori fety deposit boxes or mai me of Bank,	CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
. <b>Ba</b> saf	Full Name Mailing Address  TITLE OR POSITION To the position of the po	CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
. <b>Ba</b> saf	Full Name Mailing Address  TITLE OR POSITION To the position of the po	CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A

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

h). <b>Joint Fundraisi</b>	ng rantopant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
MEUSER VICTO	RY FUND		
	<u> </u>		
	1 499 SOUTH CAPITOL STREET SW		
Mailing Address	#405		
	WASHINGTON	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	st Fundraising Representation	
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   Tories: 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 of the deposite boxes or market depos	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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 managemen	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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 managemen	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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   Tories: List all banks or other depositories in which	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   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected VAN TAYLOR VIC	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
	Mailing Address	1900 PRESTON ROAD		
		#267 - PMB 229		
		PLANO		75093
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Join	t Fundraising Representa	ative Leadership PAC Sponsor
				_
3.		by name, address (phone number - optional)		
3.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
3.		by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	CITY A	STATE A	ZIP CODE A
3.	Full Name	CITY A		
3.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A  Cies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A  Cies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A  Cies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A  Cies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A  Cies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

DAN BISHOP VICTORY	GRASSY CREEK PL	NC 27614 STATE A	
Name of Any Connected Organizar  DAN BISHOP VICTORY  Mailing Address  RALEI  Relationship:  Connected Organizar  Designated Agent: Identify by name  Full Name  Mailing Address  TITLE OR POSITION ▼  Banks or Other Depositories: List a safety deposit boxes or maintains fur  Name of Bank,	ion, Affiliated Committee, Joint Fundra COMMITTEE  GRASSY CREEK PL  GH	FEC ID number C FEC ID number C ising Representative, or Leader  NC 27614	ZIP CODE A
Name of Any Connected Organizar DAN BISHOP VICTORY  Mailing Address  RALEI Relationship:  Connected Organizar  Designated Agent: Identify by name  Full Name  Mailing Address  TITLE OR POSITION ▼  Banks or Other Depositories: List a safety deposit boxes or maintains fur  Name of Bank,	ion, Affiliated Committee, Joint Fundra COMMITTEE  GRASSY CREEK PL  GH	FEC ID number C ising Representative, or Leade	ZIP CODE A
Name of Any Connected Organizar  DAN BISHOP VICTORY  Mailing Address  RALEI  Relationship:  Connected Organizar  Designated Agent: Identify by name  Full Name  Mailing Address  TITLE OR POSITION ▼  Banks or Other Depositories: List asafety deposit boxes or maintains fur  Name of Bank,	ion, Affiliated Committee, Joint Fundra COMMITTEE  GRASSY CREEK PL  GH	ising Representative, or Leade	ZIP CODE A
DAN BISHOP VICTORY  Mailing Address  RALEI  Relationship:  Connected Organiza  Designated Agent: Identify by name  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositories: List a safety deposit boxes or maintains fun  Name of Bank,	GRASSY CREEK PL  GH  CITY	NC 27614 STATE A	ZIP CODE A
Mailing Address  RALEI Relationship: Connected Organiza  Designated Agent: Identify by name  Full Name Mailing Address  TITLE OR POSITION ▼  Banks or Other Depositories: List a safety deposit boxes or maintains fur  Name of Bank,	GRASSY CREEK PL	STATE ▲	ZIP CODE ▲
RALEI Relationship:  Connected Organiza  Designated Agent: Identify by name  Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositories: List a safety deposit boxes or maintains full Name of Bank,	GH CITY A	STATE ▲	ZIP CODE ▲
RALEI Relationship:  Connected Organiza  Designated Agent: Identify by name  Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositories: List a safety deposit boxes or maintains full Name of Bank,	GH CITY A	STATE ▲	ZIP CODE ▲
Relationship:  Connected Organiza  Designated Agent: Identify by name  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositories: List a safety deposit boxes or maintains full Name of Bank,	CITY A	STATE ▲	ZIP CODE ▲
Relationship:  Connected Organiza  Designated Agent: Identify by name  Full Name  Mailing Address  TITLE OR POSITION   Banks or Other Depositories: List a safety deposit boxes or maintains fur	CITY A		
Connected Organization  Designated Agent: Identify by name  Full Name  Mailing Address  TITLE OR POSITION ▼  Banks or Other Depositories: List a safety deposit boxes or maintains full Name of Bank,			
Full Name  Mailing Address  TITLE OR POSITION ▼  Banks or Other Depositories: List a safety deposit boxes or maintains full Name of Bank,			
TITLE OR POSITION ▼  Banks or Other Depositories: List a safety deposit boxes or maintains further safety deposit boxes.			
Banks or Other Depositories: List a safety deposit boxes or maintains full Name of Bank,			
Banks or Other Depositories: List a safety deposit boxes or maintains full Name of Bank,			
Banks or Other Depositories: List a safety deposit boxes or maintains full Name of Bank,	CITY A	STATE ▲	ZIP CODE ▲
safety deposit boxes or maintains fur  Name of Bank,	Tel·	ephone Number	
Depository, etc.	II banks or other depositories in which the ds.	ne committee deposits funds, ho	lds accounts, rents
Mailing Address			

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
TEAM HUIZENG	A 		
	<sub> </sub> PO BOX 2485		
Mailing Address			
	SPRINGFIELD	VA	22152
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represent	tative Leadership PAC Sp
	Affiliated Committee X Joy		tative Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			tative Leadership PAC Sp
esignated Agent: Identi			tative Leadership PAC Sp
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whi	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.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identii  Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whi	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.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A

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

(h). <b>Joint Fundraisi</b>	ig Faiticipalit.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Iame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
Connecter Connec	d Organization Affiliated Committee	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee   y  Jo  y  by name, address (phone number – optional)		
connecter designated Agent: Identification	Affiliated Committee   y Jo  y by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
resignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY		
resignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY   CITY   CITY    pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
resignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  Fanks or Other Deposite afety deposit boxes or make the property of the proposition of Bank, depository, etc.	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY   CITY   CITY    pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(a)	or(h). <b>Joint Fundraisin</b>	g Participant:		
(9)	1.	<u>, , , , , , , , , , , , , , , , , , , </u>	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	С
	4.			
6.		Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Sponsor
	Mailing Address	3103 JULIAN GLEN CIR		
		WAXHAW	NC	28173
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			elephone Number	
9.				
	safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents

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

(h). <b>Joint Fundrais</b> i	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund VICTORY FUND	raising Representative	e, or Leadership PAC Sponse
Mailing Address	PO BOX 183		
Mailing Address			
	HUDSON	\/\	54016
		WI	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect		nt Fundraising Representa	ative Leadership PAC Spo
Connect	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Spo
Connect  Designated Agent: Ident	ed Organization Affiliated Committee	at Fundraising Representa	Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee	at Fundraising Representa	Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee	at Fundraising Representation	Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee   Join  Affiliated Committee   Join  Affiliated Committee   CITY	st Fundraising Representation	
Connect  Designated Agent: Ident  Full Name  Mailing Address	ed Organization Affiliated Committee Join ify by name, address (phone number – optional)  CITY		
Connect  Designated Agent: Ident  Full Name  Mailing Address	ed Organization Affiliated Committee Join ify by name, address (phone number – optional)  CITY	STATE A	
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ed Organization	STATE A	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or necessity.	ed Organization	STATE A	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Banks or Other Deposit	ed Organization	STATE A	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or not be supposed to the control of the contro	ed Organization	STATE A	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or not be boxed after the control of Bank, Depository, etc.	ed Organization	STATE A	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or not be boxed after the control of Bank, Depository, etc.	ed Organization	STATE A	ZIP CODE A

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

h). <b>Joint Fundraisi</b>		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fundr AM VICTORY FUND	raising Representative	e, or Leadership PAC Spon
I I I I I I I I I I I I I I I I I I I			
Mailing Address	9070 IRVINE CENTER DRIVE		
	SUITE 150		
	IRVINE	CA CA	92618
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	d Organization Affiliated Committee Joint	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION   anks or Other Depositor	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: Identification  Full Name  Mailing Address  TITLE OR POSITION	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: Identification 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
esignated Agent: Identification 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
esignated Agent: Identification 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

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

h). Joint Fundraisi	ng raiticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
GIMENEZ VICTO	DRY COMMITTEE		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Join Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		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: 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   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: 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 mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  ories: 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   To  ories: 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   To  ories: 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

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
BURGESS VICT	ORY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	, ,   MD	20824
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint Joint May		
esignated Agent: Identi	Affiliated Committee Joint Joint May	t Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee  Joint Market Ma		
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee  Joint Market Ma	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  Affiliated Committee  Typical Spring	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 boxes.	Affiliated Committee  Affiliated Committee  Typical Spring	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  Affiliated Committee  Typical Spring	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	Affiliated Committee  Affiliated Committee  Typical Spring	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	Affiliated Committee  Affiliated Committee  Typical Spring	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	Affiliated Committee  Affiliated Committee  Typical Spring	STATE A	ZIP CODE A

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h). <b>Joint Fundraisi</b>	ng 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 Fund	raising Representative	e, or Leadership PAC Spon
RESCHENTHAL	ER VICTORY FUND		
	824 S MILLEDGE AVE		
Mailing Address			
	SUITE 101		
	ATHENS	GA GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	
esignated Agent: Identif	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sparitive  Leadership PAC Sparitive  ZIP CODE
esignated Agent: Identif	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name   _   _    Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name   _   _    Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY   To  pries: 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,	fy by name, address (phone number – optional)  CITY   CITY   To  pries: 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). <b>Joint Fundraising</b>	Participant:	
	1.		FEC ID number
	2.		FEC ID number C
	3.		FEC ID number C
	4.		FEC ID number C
6.	Name of Any Connected C	_	ising Representative, or Leadership PAC Sponsor
	Mailing Address	2430 VANDERBILT BEACH ROAD	
		STE 108 PMB 260	
		NAPLES	FL 34108
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)	
		1	
	Mailing Address		
	TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE ▲
		Tele	ephone Number
	Banks or Other Depositori safety deposit boxes or main Name of Bank,		ne committee deposits funds, holds accounts, rents
	Depository, etc.		
	Mailing Address		
ı		CITY A	STATE ▲ ZIP CODE ▲

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

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundament	draising Representative	e, or Leadership PAC Spon
GREEN VICTOR	Y FUND		
	<sub>I</sub> PO BOX 2706		
Mailing Address			
	BRENTWOOD	TN	37024
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
Connecte	Affiliated Committee  Join Join Join Join Join Join Join Joi	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whice	STATE A Telephone Number	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   pries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b> ç	յ Participant:			
	1		FEC ID	number	C
	2.		FEC ID	number	С
	3		FEC ID	number	C
	4		FEC ID	number	С
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint Fo	undraising Rep	resentative	e, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON STREET			
		SUITE 115			
		ALEXANDRIA		VA	22314
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Joint Fundraising	Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optiona	)		
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲	5	STATE A	ZIP CODE ▲
			Telephone Nu	ımber	
9.	Banks or Other Depositor safety deposit boxes or mai Name of Bank,	ies: List all banks or other depositories in wl ntains funds.	nich the commit	tee deposit	s funds, holds accounts, rents
	Depository, etc.				
	Mailing Address				
ı		CITY ▲	5	STATE A	ZIP CODE ▲

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

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
=	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
TIFFANY VICTO	RY FUND		
	PO BOX 30844		
Mailing Address	1 O BOX 30044		
	BETHESDA	MD	20824
Deletionship		STATE ▲	ZIP CODE ▲
	CITY ▲  ed Organization	t Fundraising Represent	
Connecte	ed Organization Affiliated Committee		
Connecte esignated Agent: Identi	ed Organization Affiliated Committee		
esignated Agent: Identi	ed Organization Affiliated Committee		
esignated Agent: Identi	ed Organization Affiliated Committee		
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee Join fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee  Affiliated Committee  Fy by name, address (phone number – optional)  CITY	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee  Affiliated Committee  Fy by name, address (phone number – optional)  CITY	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite	Affiliated Committee  Affiliated Committee  Typical Join  Typical Street	STATE A	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or market	Affiliated Committee  Affiliated Committee  Typical Join  Typical Street	STATE A	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite	Affiliated Committee  Affiliated Committee  Typical Join  Typical Street	STATE A	Leadership PAC Sp
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee  Affiliated Committee  Typical Join  Typical Street	STATE A	Leadership PAC Sp
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Typical Join  Typical Street	STATE A	Leadership PAC Sp
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Typical Join  Typical Street	STATE A	Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraising</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	7.			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	8630 S PEORIA AVE		
		TULSA	OK	74132
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional	1)	
	Full Name			
	Full Name			
	Full Name   _   _   _   Mailing Address			
		CITY A	STATE A	ZIP CODE A
	Mailing Address	CITY A	STATE A Telephone Number	ZIP CODE A
9.	Mailing Address  TITLE OR POSITION	ies: List all banks or other depositories in which the state of the depositories in which the state of the st	Telephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor	ies: List all banks or other depositories in which the state of the depositories in which the state of the st	Telephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank,	ies: List all banks or other depositories in which the state of the depositories in which the state of the st	Telephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ies: List all banks or other depositories in which the state of the depositories in which the state of the st	Telephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ies: List all banks or other depositories in which the state of the depositories in which the state of the st	Telephone Number	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:			
	1		FEC ID	number	C
	2.		FEC ID	) number	C
	3		FEC ID	number	C
	4.		FEC ID	) number	C
6.		Organization, Affiliated Committee, Joint FGERS WIN THE FUTURE FUNI		oresentative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 2485			
		SPRINGFIELD		VA L	22152
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Joint Fundraising	Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional	al)		
	Full Name				
	Mailing Address				
		1	<b>.</b>	1 1	
	TITLE OR POSITION	CITY A		STATE A	ZIP CODE ▲
			Telephone N	umber	
9.	Banks or Other Depositor safety deposit boxes or ma	ies: List all banks or other depositories in wintains funds.	hich the commit	ttee deposit	s funds, holds accounts, rents
	Depository, etc.				
	Mailing Address				
		CITY ▲	;	STATE A	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraising</b>	g Participant:	FFO ID works	C
	1			
	2.			C
	3.			С
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra Y FUND	aising Representative	, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representat	tive Leadership PAC Sponsor
	Connected			
3.		by name, address (phone number – optional)		
3.	Designated Agent: Identify			
3.	Designated Agent: Identify  Full Name			
3.	Designated Agent: Identify  Full Name			
3.	Designated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)		
3.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY		
3.	Designated Agent: Identify  Full Name    Mailing Address  TITLE OR POSITION	by name, address (phone number – optional)  CITY   Tel  ies: List all banks or other depositories in which t	STATE A	ZIP CODE A
3.	Pull Name	by name, address (phone number – optional)  CITY   Tel  ies: List all banks or other depositories in which t	STATE A	ZIP CODE A
3. •	Pull Name	by name, address (phone number – optional)  CITY   Tel  ies: List all banks or other depositories in which t	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		C
	1		FEC ID number	
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundrai	sing Representative	, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.		by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name			
3.	Full Name	CITY A	STATE A	ZIP CODE A
3.	Full Name	CITY A		
3.	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY   CITY   Tele  ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
3.	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail	CITY   CITY   Tele  ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
3. •	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY   CITY   Tele  ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
3.	Full Name	CITY   CITY   Tele  ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
3.	Full Name	CITY   CITY   Tele  ries: List all banks or other depositories in which the	STATE A	ZIP CODE A

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h). Joint Fundraisi		FEC ID number	C
1		FEC ID number	С
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
=	EXAS VICTORY FUND		
l			
Mailing Address	PO BOX 30844		
	BETHESDA	, ,   MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)		
esignated Agent: Ident	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or necessarily and the second	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). <b>Joint Fundraisi</b> i	ng Participant:			
1.		FEC ID nu	mber C	
2.		FEC ID nu	mber C	
3.		FEC ID nu	mber C	
4.		FEC ID nu	mber C	
	Organization, Affiliated Committee, Joint	Fundraising Repres	entative, or	Leadership PAC Spon
TEAM FITZ				
Mailing Address	PO BOX 30844			
	BETHESDA		MD	20824
Relationship:	CITY ▲	ST	ATE 🛦	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Joint Fundraising Re	presentative	Leadership PAC Sp
	d Organization Affiliated Committee  y by name, address (phone number – option	Joint Fundraising Re	presentative	Leadership PAC Sp
esignated Agent: Identif		Joint Fundraising Re	presentative	Leadership PAC S
esignated Agent: Identif		Joint Fundraising Re	presentative	Leadership PAC Sp
esignated Agent: Identif		Joint Fundraising Re		Leadership PAC Sp
esignated Agent: Identii  Full Name  Mailing Address	y by name, address (phone number – option	Joint Fundraising Re		
esignated Agent: Identif	y by name, address (phone number – option	Joint Fundraising Re		
esignated Agent: Identification  Full Name	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in	Joint Fundraising Renal)  STAT	TE 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.	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in	Joint Fundraising Renal)  STAT	TE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management are of Bank,	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in	Joint Fundraising Renal)  STAT	TE 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.	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in	Joint Fundraising Renal)  STAT	TE A	ZIP CODE A

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

. 1	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
STEEL VICTOR	Y FUND		
Mailing Address	9070 IRVINE CENTER DRIVE #150		
	IRVINE	CA	92618
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	fy by name, address (phone number – optional)	Trundraising Represente	Leadership PAC 5
esignated Agent: Identi		Trundraising Represente	Leadership PAC 5
esignated Agent: Identi		Trundraising Represented	Leadership PAC 5
esignated Agent: Identi		Trundraising Represented	Leadership PAC 5
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: Identification Full Name     Mailing Address   TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identification Full Name     Mailing Address   TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: 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 mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  ories: 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	С	
2.			FEC	ID number	С	
3.			FEC	ID number	С	
4.			FEC	ID number	С	
		Organization, Affiliated Committee, J	loint Fundraising R	epresentative	e, or Leadership F	PAC Sponsor
	Mailing Address	824 S MILLEDGE AVE STE 101			1 1 1 1 1	
			1 1 1 1 1 1 1	1 1 1 1		
		ATHENS		GA	30605	I-I , , ,
	Relationship:	CITY A		STATE ▲	ZIP C	CODE A
	Connected	Organization Affiliated Committee	<b>X</b> Joint Fundrais	ing Representa	ative Leaders	hip PAC Sponsor
8. <b>Desig</b>	nated Agent: Identify	by name, address (phone number - o	optional)			
			'			
Fu	ull Name		'			
	ull Name		·			
M		CITY A		STATE A	ZIP CC	
M	ailing Address	CITY A	Telephone		ZIP CC	-
T 9. <b>Banks</b> safety Name	ailing Address	es: List all banks or other depositorie	Telephone	Number		]-[
T 9. <b>Banks</b> safety Name	ailing Address  FITLE OR POSITION  s or Other Depositor deposit boxes or mai of Bank, sitory, etc.	es: List all banks or other depositorie	Telephone	Number		]-[
T 9. <b>Banks</b> safety Name	ailing Address  FITLE OR POSITION  s or Other Depositor deposit boxes or main of Bank,	es: List all banks or other depositorie	Telephone	Number		]-[
T 9. <b>Banks</b> safety Name	ailing Address  FITLE OR POSITION  s or Other Depositor deposit boxes or mai of Bank, sitory, etc.	es: List all banks or other depositorie	Telephone	Number		ounts, rents

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

h). <b>Joint Fundraisi</b>	ig 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 Fund	raising Representative	e, or Leadership PAC Spon
TEAM JOYCE FO	OR PENNSYLVANIA		
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)		
esignated Agent: Identif	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION   anks or Other Depositor	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   To  pries: 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 Depositor	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   To  pries: 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A

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n). <b>Joint Fundraising</b>	,					
1.				FEC ID number	С	
2				FEC ID number	С	
3.				FEC ID number	С	
4.				FEC ID number	C	
ame of Any Connected (			int Fundrais	sing Representati	ve, or Leadership	PAC Spor
BIG DAN RODIME	R VICTORY C	OMMITTEE				
Mailing Address	50 S JONES BLVD	STE 201				
	LAS VEGAS			NV NV	89107	
Relationship:		CITY A		STATE A	ZIP	CODE A
Connected	Organization Af	filiated Committee	<b>X</b> Joint Fu	undraising Represen	ntative Leade	ership PAC S
esignated Agent: Identify				undraising Represen	tative Leade	ership PAC S
esignated Agent: Identify  Full Name				undraising Represen	tative Leade	ership PAC S
esignated Agent: Identify				undraising Represen	tative Leade	ership PAC S
esignated Agent: Identify  Full Name				undraising Represen		
esignated Agent: Identify  Full Name  Mailing Address	by name, address (p		otional)			
esignated Agent: Identify  Full Name	by name, address (p	ohone number – op	otional)			
esignated Agent: Identify  Full Name  Mailing Address	by name, address (p	ohone number – op	otional)	STATE A	ZIP (	CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or main fame of Bank,	by name, address (p	ohone number – op	otional)	STATE A	ZIP (	CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, address (p	ohone number – op	otional)	STATE A	ZIP (	CODE A

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h). <b>Joint Fundraisi</b>			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
HOUSE VICTOR	Y FUND		
Mailing Address	2318 CURTIS STREET		
	DENVER	CO	80205
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
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  anks or Other Deposite afety deposit boxes or management 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: 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 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

h). Joint Fundraising				
1.			FEC ID number	С
2.			FEC ID number	С
3			FEC ID number	C
4.			FEC ID number	С
ame of Any Connected (	organization, Affiliated Comr	nittee, Joint Fundr	aising Representativ	e, or Leadership PAC Spor
NANCY MACE VIO	CTORY FUND			
Mailing Address	228 S. WASHINGTON ST.			
	STE. 115			
	ALEXANDRIA		VA VA	22314
Relationship:	CITY	_	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Co	ommittee <b>X</b> Joint	Fundraising Represent	ative Leadership PAC S
	Organization Affiliated Co		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify			Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify  Full Name			Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify  Full Name		mber – optional)		ative Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone nui	mber – optional)		
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone nui	mber – optional)		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or main	by name, address (phone number of the control of th	mber – optional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number of the control of th	mber – optional)	STATE A	ZIP CODE A
Full Name Mailing Address	by name, address (phone number of the control of th	mber – optional)	STATE A	ZIP CODE A

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

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5(g) c	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1		FEC ID number	C
	2		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected VICTORIA VICTO	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	VIOTORIIX VIOTO			
	Mailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	GA	30605
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee Solution Joint F	Fundraising Representa	ative Leadership PAC Sponsor
3.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
3.		by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	CITY	STATE A	ZIP CODE A
3.	Full Name	CITY A		
<b>)</b> .	Full Name Mailing Address  TITLE OR POSITION	CITY A  Tele  ries: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
<b>)</b> .	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mathematical mathematical depository, etc.	CITY A  Tele  ries: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
<b>)</b> .	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank,	CITY A  Tele  ries: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
Э.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mathematical mathematical depository, etc.	CITY A  Tele  ries: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A

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5(g) c	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.	FE	EC ID number	С
	2.	FE	EC ID number	C
	3.	FE	EC ID number	C
	4	FE	EC ID number	C
6.	Name of Any Connected FRANKLIN VICTO	Organization, Affiliated Committee, Joint Fundraising	g Representative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 2811		
		LAKELAND	, , FL ,	33806
	Relationship:	CITY A	STATE A	ZIP CODE ▲
			raising Representa	
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE ▲
		•		ZIP CODE A
	TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma	Telepho	STATE <b>A</b> one Number	
	TITLE OR POSITION	Telepho	STATE <b>A</b> one Number	
	Banks or Other Depositor safety deposit boxes or ma	Telepho	STATE <b>A</b> one Number	
	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	Telepho	STATE <b>A</b> one Number	
	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	Telepho	STATE <b>A</b> one Number	

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

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h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
UNITED TO WIN			
Mailing Address	PO BOX 9891		
	ARLINGTON	, ,   VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	
esignated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		Leadership PAC S
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	CITY A  Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	CITY A  Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	CITY A  Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	CITY A  Te  ries: 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

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h). <b>Joint Fundraisi</b>	ng Participant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
TEAM HILL			
	PO BOX 7244		
Mailing Address			
	LITTLE ROCK	AR AR	72217
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	Leadership PAC Sp
	Affiliated Committee Jofy by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	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   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	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   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

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	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
MANN VICTORY	´FUND		
Mailing Address	PO BOX 1084		
	SALINA	KS KS	67402
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	tive Leadership PAC Sp
	fy by name, address (phone number – optional)		Leadership TAO S
esignated Agent: Identi			Leavership TAO S
esignated Agent: Identi			Leadership TAO S
esignated Agent: Identi			Leavership TAO 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  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 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

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5(g) or (h	). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	ime of Any Connected	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
ĺ				
_	Mailing Address	PO BOX 67237		
		TOPEKA	KS KS	66667
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee July Joint F	Fundraising Representa	ative Leadership PAC Sponsor
8. <b>De</b>	signated Agent: Identify	by name, address (phone number – optional)		
8. <b>De</b>	signated Agent: Identify	by name, address (phone number – optional)		
8. <b>De</b>		by name, address (phone number – optional)		
8. <b>De</b>	Full Name	by name, address (phone number – optional)		
8. <b>De</b>	Full Name	by name, address (phone number – optional)		
8. <b>De</b>	Full Name	CITY A	STATE A	ZIP CODE A
8. <b>De</b>	Full Name	CITY A	STATE A	
9. <b>Ba</b> saf Na	Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor of the deposition boxes or main me of Bank, pository, etc.	CITY A  Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>Ba</b> saf Na	Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or maintenance of Bank,	CITY A  Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>Ba</b> saf Na	Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor of the deposition boxes or main me of Bank, pository, etc.	CITY A  Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

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

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h). <b>Joint Fundraisi</b>	•		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint Fundr or Congress Victory Fund	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 244		
	CLINTON	, NY	13323
Relationship:	CITY A	STATE A	ZIP CODE A
	52		
	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		t Fundraising Represent	Ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
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   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 content of the conte	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	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 ma	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 mame of Bank, epository, etc	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 mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

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

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h). <b>Joint Fundraisi</b>		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
7.			
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
ADERHOLT MA	JORITY FUND		
	831 LINWOOD CT		
Mailing Address			
	DIDMINOUAN		25222
51	BIRMINGHAM	AL	35222
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee	: Fundraising Representa	ative Leadership PAC Sp
		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	Leadership PAC Sp
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   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 content of the conte	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	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 mane 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: Identii  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: Identii  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

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n). <b>Joint Fundraising</b>				1 .	EC ID nur	nhor			
1.				_					=
2.				_	FEC ID nur		С		+
3.					FEC ID nur	nber	С		_
4.					FEC ID nur	nber	С		_
ame of Any Connected (		liated Commi	ttee, Joint F	undraisii	ng Represe	ntative	, or Leac	lership PAC S	pon
DIANA VICTORY	FUND								
Mailing Address	PO BOX 7208								
	KINGSPORT	1 1 1 1		1 1 1		TN	3766	54	I
Relationship:		CITY A			STA	TE A		ZIP CODE	_
	Organization	Affiliated Com	mittee <b>x</b>	Joint Fun	draising Rep	resenta	tive	Leadership PA	
Connected esignated Agent: Identify					draising Rep	presenta	tive	Leadership PA	
Connected  esignated Agent: Identify  Full Name					draising Rep	presenta	tive	Leadership PA	
Connected esignated Agent: Identify					draising Rep	vresenta	tive	Leadership PA	
Connected  esignated Agent: Identify  Full Name					draising Rep	presenta			C S
Connected esignated Agent: Identify Full Name	by name, address	s (phone numb	per – optiona	al)					C S
Connected esignated Agent: Identify Full Name	by name, address	s (phone numl	per – optiona	al)					C S
connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address	s (phone numb	per – optiona	al)		  E ▲			C S
connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address	city 🛦	per – optiona	al)	STAT	E A		ZIP CODE A	C S
connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor of the deposit boxes or main the content of the	by name, address	city 🛦	per – optiona	al)	STAT	E A		ZIP CODE A	C S
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail	by name, address	city 🛦	per – optiona	al)	STAT	E A		ZIP CODE A	C S <sub>I</sub>
Esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, address	city 🛦	per – optiona	al)	STAT	E A		ZIP CODE A	C Sp

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

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5(g) (	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected GUS BILIRAKIS V	Organization, Affiliated Committee, Joint Fundra	ising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 2485		
		SPRINGFIELD	VA	22152
	Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Represent	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 ▲
		Tele	ephone Number	
9.				
	Banks or Other Depositor safety deposit boxes or ma Name of Bank,	ries: List all banks or other depositories in which thintains funds.	ne committee deposi	ts funds, holds accounts, rents
	safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds.	ne committee deposi	ts funds, holds accounts, rents
	safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds.	ne committee deposi	ts funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.	ne committee deposi	ts funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.	ne committee deposi	is funds, holds accounts, rents

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

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	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e or Leadership PAC Spor
BIGGS VICTORY			., e
Mailing Address	228 S WASHINGTON STREET		
Walling Address	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number – optional)	EFundraising Representa	Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		
Full Name Mailing Address  TITLE OR POSITION	CITY A  Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor affety deposit boxes or maintenance.	CITY A  Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor aftery deposit boxes or main ame of Bank,	CITY A  Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	CITY A  Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or material depositions are of Bank, epository, etc.	CITY A  Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or material depositions are of Bank, epository, etc.	CITY A  Teles: List all banks or other depositories in which	STATE A	ZIP CODE A

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5(g) or	(h). <b>Joint Fundraisi</b> r	ng Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
-				
6.		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	WAGNER VICTO			
	Mailing Address	PO BOX 183		
	Mailing Address			
		HUDSON		, 54016
	Deletienskin			
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponsor
_				
8. <b>I</b>	Designated Agent: Identif	y by name, address (phone number – optional)		
8. <b>I</b>		y by name, address (phone number – optional)		
8. <b>I</b>	Full Name	y by name, address (phone number – optional)		
3. <b>I</b>	Full Name	y by name, address (phone number – optional)		
8. <b>I</b>	Full Name	CITY A	STATE A	ZIP CODE A
8. <b>I</b>	Full Name	CITY A	STATE A	
_	Full Name Mailing Address  TITLE OR POSITION	CITY A	ephone Number	ZIP CODE 🛦
- 9. I	Full Name Mailing Address  TITLE OR POSITION	CITY A  Telestries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
- 9. I	Full Name Mailing Address  TITLE OR POSITION	CITY A  Telestries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
- 9. I	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositors of Banks, Address	CITY A  Telestries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
- 9. I	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor of Bank, Depository, etc.	CITY A  Telestries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
- 9. I	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor of Bank, Depository, etc.	CITY A  Telestries: List all banks or other depositories in which the	ephone Number	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	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Sponso
	DRY COMMITTEE		.,
Mailing Address	47 FLINTLOCK DR		
	SHIRLEY	NY	11967
Deletienskin	OLTV A	STATE ▲	ZIP CODE ▲
Relationship:	CITY A  ed Organization Affiliated Committee   Joint	Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identi			ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identi	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee		ative Leadership PAC Spc
Connecte  Designated Agent: Identi  Full Name  Mailing Address	Affiliated Committee    Joint  y by name, address (phone number – optional)		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY	Fundraising Representation	
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite	Affiliated Committee  Affiliated Committee  Type Joint  Affiliated Committ	Fundraising Represent	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite to safety deposit boxes or make the content of Bank,	Affiliated Committee  Affiliated Committee  Type Joint  Affiliated Committ	Fundraising Represent	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee  Affiliated Committee  Type Joint  Affiliated Committ	Fundraising Represent	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite to safety deposit boxes or make the content of Bank,	Affiliated Committee  Affiliated Committee  Type Joint  Affiliated Committ	Fundraising Represent	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee  Affiliated Committee  Type Joint  Affiliated Committ	Fundraising Represent	ZIP CODE A

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5(g)	or(h). <b>Joint Fundraising</b>	g Participant:		
,,,,	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	T			
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	Mailing Address	3538 SOUTH WAKEFIELD ST.		
		ARLINGTON	VA VA	22206
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		
9.	Full Name	CITY   CITY   Te  ies: List all banks or other depositories in which	STATE A	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor	CITY   CITY   ies: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY   CITY   ies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   CITY   ies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   CITY   ies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE A

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

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h). <b>Joint Fundraisi</b>	3		
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 Fund	raising Representative	e, or Leadership PAC Spon
ELISE VICTORY	FUND		
Mailing Address	PO BOX 500		1
	1		
	GLEN FALLS	NY	12801
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC 5
	fy by name, address (phone number – optional)	Trundialsing nepresent	Leadersnip PAC 5
esignated Agent: Identi		Trundialsing nepresent	Leadership PAC S
esignated Agent: Identi		Trundraising Represented	Leadersnip PAC 5
esignated Agent: Identi		Trundraising Represented	Leadersnip PAC 5
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: 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

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
SERVANT LEAD	Organization, Affiliated Committee, Joint Fund ERSHIP FUND	draising Representative	e, or Leadership PAC Spons
Mailing Address	824 S. MILLEDGE AVE STE 101		
	ATHENS	L GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identif	fy by name, address (phone number – optional)		
esignated Agent: Identif	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	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	CITY ▲  CITY ▲  pries: List all banks or other depositories in whice	Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the second state of Bank, depository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in whice	Telephone Number	

# 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	С
3.		FEC ID number	С
4		FEC ID number	С
Name of Any Connected	I Organization, Affiliated Committee, Joint F	undraising Representativ	ve, or Leadership PAC Spons
DIOE VIOTORY			
Mailing Address	PO BOX 21315		
	OKLAHOMA CITY	OK	73156
Relationship:	CITY A	STATE A	ZIP CODE ▲
Full Name	1		
Full Name L			
	CITY A	CTATE A	7ID CODE A
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A	STATE A Telephone Number	ZIP CODE A
Mailing Address  TITLE OR POSITION	ories: List all banks or other depositories in waintains funds.	Telephone Number	its funds, holds accounts, rents
Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in waintains funds.	Telephone Number	its funds, holds accounts, rents
Mailing Address  TITLE OR POSITION  Fanks or Other Deposit afety deposit boxes or make the position of the pos	ories: List all banks or other depositories in waintains funds.	Telephone Number	its funds, holds accounts, rents

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

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h). <b>Joint Fundraisi</b>		FEC ID number	С
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Renresentativ	e or Leadershin PAC Snon
GARBARINO VI		along Hoprocontaits	s, or Leadership 1 Ac open
Mailing Address	PO BOX 101		
	BAYPORT	NY	11705
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Joint  fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
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   CITY   Telepories: 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 makes.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: 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 mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: 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   Telepories: 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   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
=	I Organization, Affiliated Committee, Joint Fundr NS VICTORY COMMITTEE	raising Representative	e, or Leadership PAC Spon
DONOLOG GWE			
Mailing Address	824 S MILLEDGE AVE STE 101		
Maining / Idanoss			
	ATHENS	, GA	30605
Dalatianahin			
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee    Joint  fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC 5
		Truitulaising nepresent	Leadership PAC 5
esignated Agent: Identi		Truitulaising nepresenta	Leadership PAC S
esignated Agent: Identi		Truitulaising nepresenta	Leadership PAC 5
esignated Agent: Identi		Truitulaising nepresenta	Leadership PAC 5
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   Telepories: 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 mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: 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 mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: 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   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the deposite boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b> ç	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected (2022 PHASE 1 PA	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number - optional)		
	Mailing Address			
		_ CITY ▲	STATE A	ZIP CODE ▲
	TITLE OR POSITION	<b>*</b>		ZII OODL A
		Te	elephone Number	
9.	safety deposit boxes or ma	ies: List all banks or other depositories in which ntains funds.	the committee deposi	ts funds, holds accounts, rents
	Depository, etc.	1		
	Mailing Address			
		CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected TDOCX	d Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spon
Mailing Address	PO BOX 30844		
Maining Address			
	BETHESDA	, MD,	20824
Dalatianakin			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee  Joint  J	t Fundraising Represent	ative Leadership PAC Sp
		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		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name     Mailing Address   TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name     Mailing Address   TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of the serious part of the serious	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

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h). Joint Fundraising				ın ı	
1.			_	ID number	C
2.			FEC	ID number	С
3			FEC	ID number	C
4.			FEC	ID number	C
		ommittee, Joint F	undraising F	Representativ	re, or Leadership PAC Spo
COMER VICTORY	FUND				
Mailing Address	228 S. WASHINGTON S	Γ.			
	STE. 115				
	ALEXANDRIA			L ∨A	22314
Relationship:		CITY A		STATE A	ZIP CODE A
		d Committee x	Joint Fundrais	sing Represent	Leadership PAC
Connected	Organization Affiliated			sing Represent	Leadership PAC
Connected esignated Agent: Identify	Organization Affiliated			sing Represent	Leadership PAC
Connected esignated Agent: Identify Full Name	Organization Affiliated			sing Represent	Leadership PAC
Connected esignated Agent: Identify Full Name	Organization Affiliated	number – optiona	al)	sing Represent	Leadership PAC
Connected  esignated Agent: Identify  Full Name  Mailing Address	Organization Affiliated by name, address (phone	number – optiona	al)	STATE A	
Connected esignated Agent: Identify Full Name	Organization Affiliated by name, address (phone	number – optiona	al)	STATE A	
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositorion fety deposit boxes or main  ame of Bank,	Organization Affiliated by name, address (phone CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CITAL CONTROL CITAL CITAL CONTROL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CONTROL CITAL CO	number – optiona	Telephone	STATE A Number	
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositorion fety deposit boxes or main ame of Bank, epository, etc.	Organization Affiliated by name, address (phone CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CITAL CONTROL CITAL CITAL CONTROL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CONTROL CITAL CO	number – optiona	Telephone	STATE A Number	ZIP CODE A
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositorion fety deposit boxes or main  ame of Bank,	Organization Affiliated by name, address (phone CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CITAL CONTROL CITAL CITAL CONTROL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CONTROL CITAL CONTROL CITAL CONTROL CITAL CONTROL CONTROL CITAL CO	number – optiona	Telephone	STATE A Number	ZIP CODE A

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

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h). <b>Joint Fundraisi</b> r		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
WAGNER-MCHE	NRY VICTORY		
Mailine Adalys	6269 LEESBURG PIKE		
Mailing Address	B7		
	FALLS CHURCH	, VA	22044
Deletionahin			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC S
		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	Leadership PAC S
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail	y 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 afety deposit boxes or materials.	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

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(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint F	undraising Representat	ive, or Leadership PAC Spon
MACE MAJORIT	Y		
	, 924 C MILLEDGE AVE		
Mailing Address	824 S MILLEDGE AVE		
	STE. 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE	▲ ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Joint Fundraising Represe	ntative Leadership PAC S
	Affiliated Committee   y  y  y  y  y  y  y  y  y  y  y  y  y	Joint Fundraising Represe	ntative Leadership PAC S
			ntative Leadership PAC S
esignated Agent: Identif			ntative Leadership PAC S
esignated Agent: Identif			ntative Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optiona		ntative Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optiona		
esignated Agent: Identif	y by name, address (phone number – optiona	al)	
esignated Agent: Identification Full Name	y by name, address (phone number – optional state of the control	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 and	y by name, address (phone number – optional state of the control	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, epository, etc.	y by name, address (phone number – optional state of the control	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional state of the control	STATE A Telephone Number	ZIP CODE A

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

Organization, Affi  FUND  824 S MILLEDG  STE 101  ATHENS  Organization	liated Committee,  SE AVE  CITY   Affiliated Committe	Joint Fund	FEC I	D number D number D number D number  Presentative  GA  STATE	30605	o PAC Spon
Organization, Affi  FUND  824 S MILLEDG  STE 101  ATHENS  Organization	liated Committee,	Joint Fund	FEC I	D number  D number  presentativ	C C C C C C C C C C C C C C C C C C C	o PAC Spon
Organization, Affi  FUND  824 S MILLEDG  STE 101  ATHENS  Organization	liated Committee,	Joint Fund	FEC I	presentativ	re, or Leadership	o PAC Spon
Organization, Affi  FUND  824 S MILLEDG  STE 101  ATHENS  Organization	liated Committee,	Joint Fund		presentativ	re, or Leadership	o PAC Spon
824 S MILLEDG STE 101 ATHENS Organization	SE AVE		Iraising Re	GA	30605	o PAC Spon
824 S MILLEDG STE 101 ATHENS Organization	SE AVE		Iraising Re	GA	30605	PAC Spon
824 S MILLEDG STE 101 ATHENS Organization	CITY A					
STE 101 ATHENS Organization	CITY A					
STE 101 ATHENS Organization	CITY A					
STE 101 ATHENS Organization	CITY A					
ATHENS Organization						
Organization						
				STATE A		
	Affiliated Committe			SIAIL	ZIP	CODE A
.,,	s (phone number -	- optional)				
		1 1 1 1	1 1 1	1 1 1 1		1 1 1 1
			1	1 , 1		-
	CITY A			STATE A	ZIP (	CODE A
			F. I I	1	1_1	I_I
			reiepnone i	Number _		
-	<b>▼</b>	ries: List all banks or other depositor	CITY ▲  ries: List all banks or other depositories in which	CITY  Telephone   ries: List all banks or other depositories in which the comm	Telephone Number  ries: List all banks or other depositories in which the committee deposit	CITY A STATE A ZIP (  Telephone Number

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

	ng Participant:			
1.		FEC ID nur	nber C	
2.		FEC ID nur	mber C	
3.		FEC ID nur	nber C	
4.		FEC ID nur	mber C	
Name of Any Connected	d Organization, Affiliated Committee, Joint	Fundraising Represe	ntative, or Lea	adership PAC Sponse
GRANGER VICT	ORY COMMITTEE		1 1 1 1 1	
			1 1 1 1 1	
	PO BOX 9891			
Mailing Address				
	ARLINGTON		VA	219
Relationship:	CITY A	STA	TE ▲	ZIP CODE ▲
Full Name				
Tan Hamo				
Mailing Address				
	CITY A	STAT		ZIP CODE A
Mailing Address  TITLE OR POSITION	CITY A	STAT Telephone Number		ZIP CODE A
Mailing Address  TITLE OR POSITION	<b>√</b>			ZIP CODE A
Mailing Address  TITLE OR POSITION	ories: List all banks or other depositories in	Telephone Numbe	er LIII-	
Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or necessity.	ories: List all banks or other depositories in	Telephone Numbe	er LIII-	
Mailing Address  TITLE OR POSITION	ories: List all banks or other depositories in naintains funds.	Telephone Numbe	er	holds accounts, rents
Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or not boxes or not boxes.	ories: List all banks or other depositories in naintains funds.	Telephone Number	er	holds accounts, rents
Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or nother Deposit safety deposit boxes or nother Deposit safety deposit boxes or nother Deposi	ories: List all banks or other depositories in naintains funds.	Telephone Number	er	holds accounts, rents
Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or nother Deposit safety deposit boxes or nother Deposit safety deposit boxes or nother Deposi	ories: List all banks or other depositories in naintains funds.	Telephone Number	er	holds accounts, rents

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

h). <b>Joint Fundraisi</b> r	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
MIKE GARCIA V	CTORY FUND		
Mailing Address	9070 IRVINE CENTER DRIVE #150		
	IRVINE	CA	92618
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint  y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	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: Identification Full Name   Mailing Address  TITLE OR POSITION	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: Identification 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
esignated Agent: Identification 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

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

h). <b>Joint Fundraisi</b>	ng Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
JERRY CARL VI	CTORY COMMITTEE		
1			
Mailing Address	PO BOX 852138		
	MOBILE	, AL	36685
Relationship:	CITY ▲	STATE A	ZIP CODE A
	• · · · · <u>-</u>	0.7.1.2.2	2 0052 2
	ed Organization	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE	
esignated Agent: Identi	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   T	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: 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 Deposit afety deposit boxes or mainly and the state of t	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: 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 Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   ories: 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   ories: 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TEAM MOORE	JOINT FUNDRAISING COMMITTEE		
	370 EAST SOUTH TEMPLE STE 580		
Mailing Address			
	SALT LAKE CITY	UT	84111
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		at Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi	ify by name, address (phone number – optional)	state \$\text{STATE \$\text{\( \) }	
esignated Agent: Identi  Full Name  Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	ify by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   Ories: 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 Deposit afety deposit boxes or market	ify by name, address (phone number – optional)  CITY   Ories: 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 Deposit afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional)  CITY   Ories: 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 Deposit afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	ify by name, address (phone number – optional)  CITY   Ories: 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 mame of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	1	FEC ID number	С
1.			
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
PFLUGER VICTO	ORY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
	Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	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   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 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: 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

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(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
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	1612 CRABB RIVER RD		
	RICHMOND	TX	77469
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	1		
Full Name			
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A	STATE   Telephone Number	ZIP CODE A
Mailing Address  TITLE OR POSITION		Telephone Number	
Mailing Address  TITLE OR POSITION	pries: List all banks or other depositories in wh	Telephone Number	
Mailing Address  TITLE OR POSITION	pries: List all banks or other depositories in wh	Telephone Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposited afety deposit boxes or mails and the second states of Bank,	pries: List all banks or other depositories in wh	Telephone Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or mail after the property of the position of Bank, Depository, etc.	pries: List all banks or other depositories in wh	Telephone Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or mail after the property of the position of Bank, Depository, etc.	pries: List all banks or other depositories in wh	Telephone Number	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraising</b>	g Participant:		
	1.		FEC ID number	
	2.		FEC ID number C	
	3.		FEC ID number	
	4.		FEC ID number	
6.	Name of Any Connected O	Organization, Affiliated Committee, Joint Funda	aising Representative, or Lea	dership PAC Sponsor
	Mailing Address	PO BOX 51522		
		AMARILLO	TX	59
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representative	Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
	Full Name			
	Full Name	<u> </u>		
	Full Name			
		CITY A	STATE A	ZIP CODE A
	Mailing Address	•	STATE A	ZIP CODE A
9.	Mailing Address  TITLE OR POSITION	ies: List all banks or other depositories in which	lephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail  Name of Bank,	ies: List all banks or other depositories in which	lephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ies: List all banks or other depositories in which	lephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ies: List all banks or other depositories in which	lephone Number	

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

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h). <b>Joint Fundraisi</b>	ig i articipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TONY GONZALE	S VICTORY FUND		
	12000 STARCREST DR		
Mailing Address			
	STE 101		
	SAN ANTONIO	TX TX	78247
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representa	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	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   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	y by name, address (phone number – optional)  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	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank,	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  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

1.			FEC ID nu	umber	C
2.			FEC ID nu	umber	C
3.			FEC ID nu	umber	C
4.			FEC ID nu	umber	С
ame of Any Connected	Organization, A	ffiliated Committee, Joint F	undraising Repres	entative	, or Leadership PAC Spon
SHEDD VICTOR	Y FUND			1 1	
Mailing Address	PO BOX 365				
			1 1	VA	22101
	MCLEAN				
	d Organization		Joint Fundraising Re	TATE ▲	ZIP CODE ▲ tive Leadership PAC Sp
Connecte	d Organization		Joint Fundraising Re		
Connecte esignated Agent: Identif	d Organization	Affiliated Committee	Joint Fundraising Re		
Connecte esignated Agent: Identif	d Organization	Affiliated Committee	Joint Fundraising Re		
Connecte esignated Agent: Identif	d Organization  y by name, addre	Affiliated Committee	Joint Fundraising Re		Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	d Organization  y by name, addre	Affiliated Committee	Joint Fundraising Re	epresentar	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization  y by name, addre	Affiliated Committee	Joint Fundraising Re	epresentat	Leadership PAC Sp

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

5(g) or (l	h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4		FEC ID number	C
_				
6. <b>N</b>		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	ISSA VICTORY F	UND 		
				1 1 1 1 1 1 1 1 1 1 1
	Mailing Addus a	9070 IRVINE CENTER DRIVE		
	Mailing Address	SUITE 150		
		IRVINE	CA	92618
	Deletienskin		CA CA	
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee Joint F	Fundraising Representa	ative Leadership PAC Sponsor
8. <b>D</b> e	Full Name	by name, address (phone number – optional)		
3. <b>D</b> e		by name, address (phone number – optional)		
3. <b>D</b> e	Full Name	by name, address (phone number – optional)		
3. <b>D</b> €	Full Name			
3. <b>D</b>	Full Name	CITY	STATE A	ZIP CODE A
8. <b>D</b> 6	Full Name	CITY A	STATE A	
8. <b>D</b> 6	Full Name	CITY A	1	
 Э. <b>В</b> а	Full Name Mailing Address  TITLE OR POSITION	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
——————————————————————————————————————	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
——————————————————————————————————————	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor of the deposition boxes or main arms of Bank,	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
——————————————————————————————————————	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or ma  ame of Bank, epository, etc.	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
——————————————————————————————————————	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or ma  ame of Bank, epository, etc.	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

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

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h). <b>Joint Fundraisi</b>	ng Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
GOODEN VICTO	JRY FUND		
	<sub>1</sub> 75 S HIGH ST		
Mailing Address			
	STE. 4		
	DUBLIN	OH OH	43017
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee	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: Identi  Full Name  Mailing Address	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: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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 Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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

h). <b>Joint Fundraisi</b> r	1	EEC ID sumbar	C
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
HOUSE MAJORI	TY TRUST		
Mailing Address	228 S WASHINGTON STREET SUITE 115		
	ALEXANDRIA	, ,   VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

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

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(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	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
WOMACK MAJOR	RITY FUND		
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	, ,   VA	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
	Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identify		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identify		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identify	by name, address (phone number – optional)	t Fundraising Represent	
Pesignated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identify	by name, address (phone number – optional)  CITY		
Pesignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   CITY   Teles: 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	n). <b>Joint Fundraisin</b> ç	Participant:		
	1.		FEC ID number	C
	2		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6. <b>N</b> a	ame of Any Connected (	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	Leadership PAC Sponsor
8. <b>D</b> e	esignated Agent: Identify	by name, address (phone number - optional)		
8. <b>D</b> e	esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
8. <b>D</b> e		by name, address (phone number – optional)		
8. <b>D</b> e	Full Name	by name, address (phone number – optional)		
8. <b>D</b> e	Full Name	by name, address (phone number – optional)		
8. <b>D</b> e	Full Name	CITY A	STATE A	ZIP CODE A
8. <b>D</b> e	Full Name	CITY A	STATE ▲ ephone Number	
9. <b>B</b> a	Full Name Mailing Address  TITLE OR POSITION	CITY   CITY   Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. <b>B</b> a	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or main ame of Bank, epository, etc.	CITY   CITY   Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

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Page <u>147</u> **of** <u>189</u>

h). <b>Joint Fundraisi</b>	ig Faiticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
BRADY VICTOR	Y FUND 		
Mailine Addus a	8505 TECHNOLOGY FOREST PLACE		
Mailing Address	SUITE 702		
			77391
51	THE WOODLANDS	TX	77381
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC S
	Affiliated Committee Join  Ty by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC S
esignated Agent: Identification Full Name Mailing Address	by by name, address (phone number – optional)	STATE	
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
Full Name Mailing Address  TITLE OR POSITION	cy by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank,	cy by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	cy by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in which	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.	cy by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in which	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.	cy by name, address (phone number – optional)  CITY   CITY   Pries: 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

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Connected Organization Affiliated Committee Joint Fundraising Representative Leadersh  Designated Agent: Identify by name, address (phone number – optional)  Full Name				C	er	mbe	nun	ID r		EC	FE	FE				J		L		⊥					┙								L
A. STATE ▲ ZIP CO  Resignated Agent: Identify by name, address (phone number — optional)  FEC ID number C  FEC ID number I  FURTHER IN THE ID NUMBER IN THE ID				C	er	mbe	nun	ID r		ΞC	FE	FE					_	ı	-	1		1		1	_	_							ı
A. FEC ID number				C	er	mbe	nun	ID r		ΞC	FE	FE	ı				_									Ī							
Mailing Address  228 S. WASHINGTON STREET  SUITE 115  ALEXANDRIA  ALEXANDRIA  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadersl  Leadersl  Leadersl  Pull Name  Mailing Address  CITY ▲  STATE ▲  ZIP CO  Telephone Number  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CO  Telephone Number  Title Or Position State A  Title Or Position Sta				C	er	mbe	nun	ID r	CIE	EC	FE	FE	ı			, J	_																L
Mailing Address  228 S. WASHINGTON STREET  SUITE 115  ALEXANDRIA  Relationship: CITY ▲ STATE ▲ ZIP C  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leaderst  esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CO  Telephone Number –   Telephone N																														_	_	_	
Mailing Address  228 S. WASHINGTON STREET  SUITE 115  ALEXANDRIA  Relationship:  CITY ▲ STATE ▲ ZIP CO  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadersl  Leadersl  Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CO  Telephone Number  Telephone Number  Telephone Number  Telephone Number  Telephone Number  Telephone or maintains funds.  ame of Bank, epository, etc.	PAC Spon	eadership PA	Lead	e, o	ativ	enta	ese	epre	Rep	j F	ng	sing	isi	ai	dra	nd	un	Fι	nt I	in	oi	J	e,	ee,	ee	ee	te	tte	tte	tt	tt	tt	it
Relationship:  CITY ▲  STATE ▲  ZIP C  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leaderst  Leaderst  Leaderst  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CO  Telephone Number																												L		L	L		
Relationship:  CITY ▲  STATE ▲  ZIP C  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leaderst  Leaderst  Pull Name  Mailing Address  TITLE OR POSITION  CITY ▲  STATE ▲  ZIP CO  Telephone Number															L													L	L	L	L		
SUITE 115  ALEXANDRIA  CITY ▲  STATE ▲  ZIP C  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leaderst  esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CO  Telephone Number  Telephone Number  Telephone Number  anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounterly deposit boxes or maintains funds.  ame of Bank, epository, etc.	1 1 1			I	ı	1	1	ı		1	ı		I	ı	I	ı	ı	ı	ı	ı	I	ı	1	1				-	-		Γ	Т	T
Relationship:  CITY ▲ STATE ▲ ZIP CO  Connected Organization  Affiliated Committee											1		1	i																		Ī	
Connected Organization	-	2314	2231		.	VA																											
esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION   CITY   STATE   ZIP CO  Telephone Number  Telephone Number  anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounted the deposit boxes or maintains funds.  ame of Bank, epository, etc.	CODE A	ZIP CO			 E ▲	ATE	STA	5	_																							_	_
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CO  Telephone Number																				٦ti،	n	_ ^		ır_	۵r	۵r	ام	۵	۵	٦,	٦,	h	٦h
Telephone Number Telephone Number Telephone Number																	<u> </u>	na 	on _	otio	op <sup>†</sup>	- 0	· _	er -	er	er	er	)e	)e			be	nb
Telephone Number Telephone Number																			on L	otic	op†	- 0		er -	er	er	L_	be	L L	D€		b∙	nb
anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accordately deposit boxes or maintains funds.  ame of Bank, epository, etc																		lai		otic		- 0		er -	er	ər	L L	pe	L			b•	nb
anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accordately deposit boxes or maintains funds.  ame of Bank, epository, etc.	]-[															, 	_     _   _     _			otic		- 0	·	er -	er	er	er	be	L			ь (	nb
afety deposit boxes or maintains funds.  ame of Bank, epository, etc.	] - [ ] DDE 🛦	ZIP CODI						ST											L L	otic	DP <sup>†</sup>	- 0		er -	er	er	L.	be	be	D€		ь <del>•</del>	
afety deposit boxes or maintains funds.  ame of Bank, epository, etc.	] - [ ] DDE 🛦	ZIP CODI								ne	non	oho	eph	ele	Te					otic	op <sup>†</sup>	- 0		er -	er	er	bei	be	L				
epository, etc.			- l	te fu	L	er —	mbe	Nun	e N																								
Mailing Address			l - l	its fu	L	er —	mbe	Nun	e N																								
			l - l	tts fu	L	er —	mbe	Nun	e N																								
			nds, h	tts fu	L	er —	mbe	Nun	e N																								
			nds, h	tts fu	L	er —	mbe	Nun	e N																								

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h). <b>Joint Fundrais</b> i			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
NUNES VICTOR	Y FUND		
Mailing Address	PO BOX 6545		
	VISALIA	CA CA	93290
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee    Joint  fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)  CITY		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). <b>Joint Fundrais</b> i	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
NRSC/NRCC VI	CTORY COMMITTEE		
MANUS AND SO	228 S WASHINGTON STREET #115		
Mailing Address			
	ALEXANDRIA		20244
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Join	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Ident	ify by name, address (phone number – optional)	t rundraising riepresent	Leadership FAC 3
esignated Agent: Ident		Trundialing represent	Leadership FAC 5
esignated Agent: Ident		Trundalsing Represent	Leadership FAC 5
esignated Agent: Ident		Truncialing represent	Leadership FAC 5
esignated Agent: Ident	ify by name, address (phone number – optional)		
esignated Agent: Ident	ify by name, address (phone number – optional)	STATE A	
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)  CITY		
Full Name Mailing Address	ify by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or n	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
HUDSON FREE	DOM FUND		
	228 S WASHINGTON ST STE 115		
Mailing Address	220 0 W/O III C TON C TO 12 TO		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC Sp
	and Organization Affiliated Committee Joint Join	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	ify by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	ify by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or markets.	ify by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	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 mane of Bank,	ify by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	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 mane of Bank,	ify by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Fanks or Other Deposite afety deposit boxes or make the property of the property of the position of the property of the position of the property of the propert	ify by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	ify by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
STIVERS VICTO	PRY COMMITTEE		
	<u> </u>		
	228 S WASHINGTON ST STE 115		
Mailing Address			
	1. EVANDENA		00044
	ALEXANDRIA	L VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	Leadership PAC S
	Affiliated Committee Join Join Strain Join Strain S	nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
Full Name Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY ▲  Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the state of Bank,	fy by name, address (phone number – optional)  CITY ▲  Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the deposite boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY ▲  Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY ▲  Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the deposite boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY ▲  Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
SCHWEIKERT	ICTORY COMMITTEE		
	228 S WASHINGTON STREET STE 115		
Mailing Address			
	N 5 X A X 5 X A X 5 X A X A X A X A X A X		00044
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of the serious part of the serious	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of Bank,	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of Bank,	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   Ories: 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

h). <b>Joint Fundraisi</b>	ng Participant:		
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 Fund	raising Representativ	e, or Leadership PAC Spons
SCALISE LEADE	RSHIP FUND		
1			
Mailing Address	PO BOX 9891		
	ARLINGTON	VA	22219
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	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		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: 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   Tories: 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 of the control of the	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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 of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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   Tories: 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   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

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(h). <b>Joint Fundraisi</b> r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponso
MCCAUL VICTO	RY FUND		
Mailing Address	PO BOX 341027		
	AUSTIN		78734
		STATE ▲	ZIP CODE ▲
Relationship:	CITY A  d Organization Affiliated Committee	Fundraising Representa	
Connecte			
Connecte	d Organization Affiliated Committee		
Connecte  Designated Agent: Identif	d Organization Affiliated Committee		
Connecte  Designated Agent: Identif	d Organization Affiliated Committee		
Connecte  Designated Agent: Identif	d Organization Affiliated Committee		Leadership PAC Spo
Connecte  Designated Agent: Identification  Full Name  Mailing Address	Affiliated Committee   Joint  y by name, address (phone number – optional)		
Connecte  Designated Agent: Identif	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY	Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY   CITY   Te	Fundraising Representation	Leadership PAC Spo

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1	1	FEO ID I	C
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
WRIGHT VICTO	RY FUND		
Mailing Address	75 S HIGH ST		
	STE. 4		
	DUBLIN	OH	43017
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC Sp
	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
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  anks or Other Deposite afety deposit boxes or make the state of the content of	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A elephone Number	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 elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety 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 elephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety 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 elephone Number	ZIP CODE A

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h). <b>Joint Fundraisi</b>	ig i articipant.		
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		e, or Leadership PAC Spon
TEAM BOEBER	JOINT FUNDRAISING COMMITTE	<u> </u>	
	<sub> </sub> PO BOX 752		
Mailing Address			
	RIFLE	CO	81652
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC S
Connecte	Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC S
Connecte		t Fundraising Represent	ative Leadership PAC S
Connecte		t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC S
Connecte esignated Agent: Identi Full Name	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	
Connecte esignated Agent: Identi Full Name	fy by name, address (phone number – optional)  CITY		
Connecte  esignated Agent: Identify  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   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
connected esignated Agent: Identification of Position of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Connecte  esignated Agent: Identify  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   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
connected esignated Agent: Identification of Position of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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Mailing Address					
ame of Bank, epository, etc.					
anks or Other Depositor afety deposit boxes or ma	ries: List all bani intains funds.	ks or other depositories in v	vhich the commit	tee deposit	s funds, holds accounts, rent
			Telephone N	umber	
TITLE OR POSITION	▼	CITY ▲		STATE A	ZIP CODE ▲
		OUTV +			710 0005 4
Mailing Address					
Full Name					
	by name, addre	Affiliated Committee	Joint Fundraising	nepresent	Leadership PAC Sp
	I Organization		laint Frankrish		
Relationship:		CITY A		OH STATE ▲	ZIP CODE ▲
	DUBLIN			. 04	1 43016
Mailing Address	PO BOX 3653	3			
	. DO DOY 2252				
<u> </u>					
ame of Any Connected FALLON VICTOR		ffiliated Committee, Joint	Fundraising Rep	resentativ	e, or Leadership PAC Spon
4					<u> </u>
3.				number	C
2.				number	C
1			I EEC ID	number	C

FEC Form 1S (Revised 02/2017) for

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4		FEC ID number	С
lame of Any Connected	d Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spons
	D.O. DOV.0545		
Mailing Address	P.O. BOX 6545		
	VISALIA 	CA	93290
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee	Fundraising Represent	Leadership 170 op
			Leadership FAO Op
esignated Agent: Ident			Leadership PAC Sp
esignated Agent: Ident			
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Ident	ify by name, address (phone number – optional)  CITY		
Full Name  Mailing Address  TITLE OR POSITION  Canks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Fanks or Other Deposite afety deposit boxes or name of Bank, depository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Canks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Fanks or Other Deposite afety deposit boxes or name of Bank, depository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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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
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e. or Leadership PAC Spon
BETH VICTORY	_		
Mailing Address	PO BOX 630167		
	IRVING	TX	75063
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC S
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
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  anks or Other Deposite afety deposit boxes or management 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: 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 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

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

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Mailing Address					
Mailing Address					
A4 ''' A 1 1					
ame of Bank, epository, etc.					
anks or Other Depositor afety deposit boxes or ma	r <b>ies:</b> List all bar iintains funds.	nks or other depositories	in which the com	mittee deposi	ts funds, holds accounts, ren
			Telephone	Number [_	
TITLE OR POSITION	<b>V</b>	, , , , , , , , , , , , , , , , , , ,	Talanhari		
		CITY A		STATE ▲	ZIP CODE ▲
Mailing Address					
Mailing Address	1				
esignated Agent: Identify	by name, addr	ress (phone number – op	tional)		
Connected	l Organization	Affiliated Committee	<b>X</b> Joint Fundrais	ing Represent	ative Leadership PAC Sp
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
	DULLES			_ VA	20166
Mailing Address	22780 INDIA	N CREEK DRIVE, STE 100			
VICTORY 2022					
	Organization, <i>I</i>	Affiliated Committee, Jo	nt Fundraising R	tepresentativ	e, or Leadership PAC Spon
4			FEC	ID number	C
3.				ID number	C
2.				ID number	C

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

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	ve, or Leadership PAC Spon
FISCHBACH VIC	TORY FUND		
	1 824 S MILLEDGE AVE		
Mailing Address	ST 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represen	tative Leadership PAC S
Connecte			tative Leadership PAC S
Connecte	d Organization Affiliated Committee		tative Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee		tative Leadership PAC S
Connecte esignated Agent: Identif	Affiliated Committee x		
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee x  Ty by name, address (phone number – optional		Leadership PAC S
Connecte esignated Agent: Identif	Affiliated Committee x  Ty by name, address (phone number – optional	STATE A	
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee x  Ty by name, address (phone number – optional		
connecte esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y  Ty by name, address (phone number – optional	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identification of the properties of the propertie	Affiliated Committee  y  y  y  y  y  y  CITY  CITY  CITY  Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank,	Affiliated Committee  y  y  y  y  y  y  CITY  CITY  CITY  Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite  affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  y  y  y  y  y  y  CITY  CITY  CITY  Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y  y  y  y  y  y  CITY  CITY  CITY  Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite  affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  y  y  y  y  y  y  CITY  CITY  CITY  Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A

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h). <b>Joint Fundrais</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	2470 DANIELLS BRIDGE ROAD		
·	SUITE 121		
	ATHENS	GA	30606
Data Carade	CITY ▲	STATE ▲	ZIP CODE ▲
		oint Fundraising Representa	Leadership PAC Sp
Connect	ed Organization Affiliated Committee	oint Fundraising Representa	Leadership PAC Sp
Connecte con	ed Organization Affiliated Committee	oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	ed Organization Affiliated Committee	oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	and Organization Affiliated Committee X Journal Journa		
esignated Agent: Ident	ed Organization Affiliated Committee X Joint Joi	sint Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION	ed Organization Affiliated Committee X Joint Joi		
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee	STATE   Telephone Number  ch the committee deposit	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or n  ame of Bank, epository, etc.	Affiliated Committee	STATE   Telephone Number  ch the committee deposit	ZIP CODE A

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

h). Joint Fundraisi		FEC ID number	С
1.		FEC ID number	C
2.			C
3.		FEC ID number	
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Spon
	ER - FUTURE 1ST COMMITTEE		-,
Mailing Address	P.O. BOX 2381		
, and the second			
	OTTAWA	, IL ,	61350
Relationship:	CITY ▲	STATE A	ZIP CODE A
riolationiomp.	OII I	SIAIL	211 0001 🛋
	Affiliated Committee	Fundraising Represent	ative Leadership PAC S
		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or necessarily and the second	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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anization, Affiliated Committee, Joir OMMITTEE	FEC ID FEC ID	number (number (number (	C C C or Leadership PAC Spons
anization, Affiliated Committee, Joir OMMITTEE  24 S. MILLEDGE AVENUE	FEC ID	number (	C
anization, Affiliated Committee, Joir OMMITTEE  24 S. MILLEDGE AVENUE	FEC ID	number	C
anization, Affiliated Committee, Joir OMMITTEE  24 S. MILLEDGE AVENUE			
OMMITTEE  24 S. MILLEDGE AVENUE  SUITE 101	nt Fundraising Rep	resentative,	or Leadership PAC Spons
OMMITTEE  24 S. MILLEDGE AVENUE  SUITE 101	nt Fundraising Rep	resentative,	or Leadership PAC Spons
24 S. MILLEDGE AVENUE  SUITE 101			
SUITE 101			
SUITE 101			
SUITE 101			
THENC			
THENS	<b>.</b>	GA	30605
CITY ▲		STATE A	ZIP CODE ▲
name, address (phone number – opt	ional)		
			7ID CODE 4
CITY A		SIAIE A	ZIP CODE ▲
	Telephone Nu	ımber	
	Affiliated Committee  name, address (phone number – opti	Affiliated Committee  Joint Fundraising  name, address (phone number – optional)  CITY   Telephone Nu  List all banks or other depositories in which the committe	Affiliated Committee    Joint Fundraising Representation

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected MULLIN VICTOR	Organization, Affiliated Committee, Joint Fundrai	ising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	332 W. LEE HIGHWAY		
		WARRENTON	, VA	20186
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected		Fundraising Represent	
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			ephone Number	-   -
			phione reamber	
9.	Name of Bank,	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
9.	Name of Bank,	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the		s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

5(g) or	(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
-				
6. <b>I</b>		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	TAKE BACK THE	HOUSE 2020		
	Moiling Address	PO BOX 30844		
	Mailing Address			
		BETHESDA	MD	, 20824
	Deleteration		MD MD	
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
-				
- 8. <b>[</b>	Full Name	by name, address (phone number – optional)		
- 8. <b>[</b>		by name, address (phone number – optional)		
- 8. <b>[</b>	Full Name	by name, address (phone number – optional)		
- 8. <b>[</b>	Full Name			7ID 0005
- 8. <b>C</b>	Full Name	CITY A	STATE A	ZIP CODE A
- 8. <b>[</b>	Full Name	CITY A	STATE A	
9. <b>E</b>	Full Name Mailing Address  TITLE OR POSITION	CITY   CITY   Tel  ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

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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
=	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
FRIENDS OF BU	JRCHETT		
	1 95 WHITE BRIDGE RD		
Mailing Address			
	SUITE 207		
	NASHVILLE	TN	37205
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	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: 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   CITY   To  ories: 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 mailing and ma	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: 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   To  ories: 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   To  ories: 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   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b> ç	g Participant:			
	1		FEC I	D number	C
	2	<u> </u>	FEC I	D number	C
	3		FEC I	D number	C
	4		FEC I	D number	C
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint F Y COMMITTEE	undraising Re	epresentativ	e, or Leadership PAC Sponsor
	Mailing Address	4031 THICKET LANE			
		HARRISBURG		PA	17110
	Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Joint Fundraisir	ng Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number - optional	ıl)		
		1			
	Mailing Address				
		Q.T. (			
	TITLE OR POSITION	▼ CITY ▲		STATE A	ZIP CODE ▲
			Telephone I	Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositories in wintains funds.	hich the comm	nittee deposit	s funds, holds accounts, rents
	Mailing Address				
		CITY ▲		STATE ▲	ZIP CODE ▲

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

(h). <b>Joint Fundraisi</b>	ig Faiticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
JUDGE CARTER	R VICTORY FUND		
Mailing Address	22780 INDIAN CREEK DR.		
	SUITE 100		
	DULLES	, ,   VA	20166
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Join  Ty by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	
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	STATE A	
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Topries: 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   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Topries: 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,	fy by name, address (phone number – optional)  CITY   CITY   Topries: 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 mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Topries: 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   Topries: 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

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h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
ASHLEY HINSOI	N VICTORY COMMITTEE		
I			
Mailing Address	P.O. BOX 341027		
	AUSTIN	TX	78734
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	st Fundraising Representation	
esignated Agent: Identif  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Deposito	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION AREA OF Other Depositor Afety deposit boxes or mailing and ma	fy by name, address (phone number – optional)  CITY   CITY   Tories: 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 Deposito	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). <b>Joint Fundraisi</b>	ng 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	raising Representative	e, or Leadership PAC Spon
WIN IN 2020			
	<u> </u>		
	1 320 FIRST STREET SOUTHEAST		
Mailing Address			
	WASHINGTON	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identing Full Name      Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: 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,	fy by name, address (phone number – optional)  CITY   CITY   To  pries: 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,	fy by name, address (phone number – optional)  CITY   CITY   To  pries: 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   To  pries: 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8 a

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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	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
THE VALADAO	VICTORY FUND		
Mailing Address	5132 N PALM AVE		
	NUM 227		
	FRESNO	CA CA	93704
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		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		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t 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   To  pries: 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 of the control of the	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: 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 mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  pries: 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   To  pries: 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   To  pries: 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

Page <u>174</u> **of** <u>189</u>

5(g) c	or(h). <b>Joint Fundraising</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundrais HOUSE CALIFORNIA 2020	ing Representative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	ndraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number - optional)		1
	i uli ivallie			
		1		
	Mailing Address			
	Mailing Address	CITY ▲	STATE A	ZIP CODE A
		•		ZIP CODE A
9.	Mailing Address  TITLE OR POSITION	Telepies: List all banks or other depositories in which the	STATE A	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	Telepies: List all banks or other depositories in which the	STATE A	

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h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
TAKE BACK THI	E HOUSE TEXAS 2020		
	<sub>1</sub> P.O. BOX 30844		
Mailing Address	1.0. 50% 30077		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
	fy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC S
		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadersnip PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	Leadersnip PAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	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,	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

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h). <b>Joint Fundraisi</b>	ng 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 Fun	draising Representativ	e, or Leadership PAC Spon
LONG TEAM			
	<u> </u>		
	<sub>I</sub> P.O. BOX 3864		
Mailing Address			
			05000
	SPRINGFIELD	MO MO	65808
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	Leadership PAC Sp
Connecte	Affiliated Committee   y Jo  y by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identification  Full Name  Mailing Address	y by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION Anks or Other Deposite Cafety deposit boxes or mame of Bank,	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION Anks or Other Deposite Cafety deposit boxes or mame of Bank,	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	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   pries: List all banks or other depositories in which	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   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

5(g) or (h).	Joint Fundraisin	ng Participant:		
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
		Organization, Affiliated Committee, Joint Fundi	raising Representativ	e, or Leadership PAC Sponsor
L				
1	Mailing Address	824 S. MILLEDGE AVENUE		
		SUITE 101		
		ATHENS	GA L	30605
F	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		y by name, address (phone number – optional)		
Fu	II Name	y by name, address (phone number – optional)		
Fu		y by name, address (phone number – optional)		
Fu	II Name	y by name, address (phone number – optional)		
Fu Ma	II Name	CITY A	STATE A	ZIP CODE A
Fu Ma	II Name	CITY A	STATE A	ZIP CODE A
Fu Ma	II Name	CITY A	STATE A	ZIP CODE A
Fu Ma	II Name	CITY A  Teles: List all banks or other depositories in which	elephone Number	
9. Banks safety Name Deposi	II Nameailing Address  ITLE OR POSITION  or Other Deposito deposit boxes or material of Bank,	CITY A  Teles: List all banks or other depositories in which	elephone Number	
9. Banks safety Name Deposi	ailing Address  ITLE OR POSITION  or Other Deposito deposit boxes or main of Bank, itory, etc.	CITY A  Teles: List all banks or other depositories in which	elephone Number	
9. Banks safety Name Deposi	ailing Address  ITLE OR POSITION  or Other Deposito deposit boxes or main of Bank, itory, etc.	CITY A  Teles: List all banks or other depositories in which	elephone Number	

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

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h). <b>Joint Fundraisi</b>	1	EEO ID	С
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
MAJORITY RISI	<b>\G</b>		
Mailing Address	P.O. BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane 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 management 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

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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
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TEAM MURPHY			
	PO BOX 97275		
Mailing Address	100000000000000000000000000000000000000		
	RALEIGH	NC NC	27624
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Joint Joint fy 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: Identi  Full Name  Mailing Address	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: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: 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 Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  ories: 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  ories: 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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n). <b>Joint Fundraisin</b> g			1 1	FEC ID number	C
1.					
2.				FEC ID number	C
3.				FEC ID number	С
4.				FEC ID number	C
=	=	ted Committee, Joir	nt Fundraisi	ng Representativ	e, or Leadership PAC Spor
HUDSON VICTOR	RY FUND				
Mailing Address	824 S. MILLEDGE	AVE			
	SUITE 101				
	ATHENS			GA	30605
Relationship:		CITY A		STATE A	ZIP CODE ▲
	Organization Af	ffiliated Committee	Joint Fun	draising Represent	ative Leadership PAC S
Connected esignated Agent: Identify		ffiliated Committee		draising Represent	ative Leadership PAC S
Connected		ffiliated Committee		draising Represent	Leadership PAC S
Connected esignated Agent: Identify		ffiliated Committee		draising Represent	Leadership PAC S
Connected  esignated Agent: Identify  Full Name		ffiliated Committee		draising Represent	Leadership PAC S
Connected  esignated Agent: Identify  Full Name	by name, address (p	ffiliated Committee	ional)		Leadership PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address (p	phone number – opt	ional)		
Connected  esignated Agent: Identify  Full Name	by name, address (p	phone number – opt	ional)		
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	by name, address (p	phone number – opt	ional)	STATE A	
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or mail	by name, address (p	phone number – opt	ional)	STATE A	ZIP CODE A
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or mail ame of Bank, epository, etc.	by name, address (p	phone number – opt	ional)	STATE A	ZIP CODE A

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1			
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	824 S. MILLEDGE AVE SUITE 101		
	ATHENS	ı GA ı	30605
	ATHENS		
Relationship:	CITY A	STATE ▲ Fundraising Representa	ZIP CODE ▲  ative Leadership PAC Spon
Designated Agent: Identif	CITY A		
Connecte  Designated Agent: Identif	CITY ▲  ed Organization Affiliated Committee   ✓ Joint		
Designated Agent: Identif	CITY ▲  ed Organization Affiliated Committee   ✓ Joint		
Designated Agent: Identification	CITY A  ed Organization Affiliated Committee   y Joint  fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Spons
Designated Agent: Identif	CITY A  and Organization Affiliated Committee   Symptomic Joint  Affiliated Committee   Affiliated Committee   Symptomic Joint  Affiliated Committee   Affiliated	Fundraising Representa	Leadership PAC Spons

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

(h). <b>Joint Fundraisi</b>			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
lama of Any Connector	Overeninstian Affiliated Committee Joint Fund	veising Denvesentative	a ay Laadayahin DAC Chan
NORTH TO THE	Organization, Affiliated Committee, Joint Funda FUTURE	alsing nepresentative	e, or Leadership FAC Spons
Mailing Address	PO BOX 2814		
	SEWARD	AK	99664
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
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   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or market afety deposit boxes or market and market afety deposit and market afety deposit a	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	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make afety deposit boxes or make afety deposit boxes.	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank, epository, etc	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 mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

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

h). <b>Joint Fundraisi</b> r		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
KUSTOFF VICTO	ORY FUND		
Mailing Address	1661 AARON BRENNER DR		
Mailing Address	SUITE 300		
	MEMPHIS	, TN ,	38120
Relationship:			
neialionsnip.	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor defety deposit boxes or mails are of Bank,	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or material deposition of Bank, epository, etc	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or material deposition of Bank, epository, etc	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A

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5(a)	or(h). <b>Joint Fundraisin</b>	g Participant:		
(9)	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4.			
6.		Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 68		
		SOUTH SALEM	NY	10590
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	•	STATE A	ZIP CODE <b>A</b>
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor	ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which	elephone Number	

# 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	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e or Leadershin PAC Spon
WIN THE FUTUR		uloni <b>g</b> noprocontains	, o
Mailing Address	PO BOX 2485		
	SPRINGFIELD	VA I	22152
Deletienskin	CITY A	STATE ▲	ZIP CODE ▲
Relationship:		Fundraising Representa	Leadership PAC S
Connecte		Fundraising Representa	Leadership PAC S
Connecte	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identification	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representation	Leadership PAC S
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee  Affiliated Committee  Y Joint  To be a committee of the committee of	Fundraising Representation	Leadership PAC S
esignated Agent: Identification	Affiliated Committee  Affiliated Committee  Y Joint  Ty by name, address (phone number – optional)  CITY		
connected esignated Agent: Identification of the position of t	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Esignated Agent: Identification of Bank, Connected Agent: Identification of Connected	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
connected esignated Agent: Identification of the position of t	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

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9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main that the same of Bank, Depository, etc.  Mailing Address	ries: List all banks	CITY A  or other depositories in	Telephone		ZIP CODE A  s funds, holds accounts, rents	
	Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks		Telephone	STATE A	ZIP CODE ▲	
	Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks		Telephone	STATE A	ZIP CODE ▲	
	Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main that the safety deposit boxes or main the safety deposit	ries: List all banks		Telephone	STATE A	ZIP CODE ▲	
	Mailing Address  TITLE OR POSITION  Banks or Other Deposito	ries: List all banks		Telephone	STATE A	ZIP CODE ▲	
	Mailing Address		CITY A		STATE ▲		
	Mailing Address		CITY A				
	Full Name						
◡.	-coignated Agent. Identili)	, by name, address	(Priorio number — option	141)			
8.	Designated Agent: Identify				my represent	Leadership FAC Spor	ioUí
		d Organization	CITY ▲  Affiliated Committee	Joint Fundrais	STATE A	ZIP CODE ▲  ative Leadership PAC Spor	
	Relationship:	AUSTIN	OITV A		TX CTATE A	78734	
						70704	
	Mailing Address	PO BOX 341027					
6.	Name of Any Connected WESLEY HUNT			Fundraising F	Representative	e, or Leadership PAC Sponso	r L
	4.			FEC	ID number	C	_
	3.				ID number	C	4
	2.				ID number	C	4
	1.			FEC	ID number	C	4
	1						
5(g) c	or(h). <b>Joint Fundraisin</b>	g Participant:					

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

1.		FEC ID number	C
3. 4. 4.		FEC ID number	
3. 4. 4.			C
4.		FEC ID number	С
Name of Any Connected		FEC ID number	C
PALAZZO VICTO	I Organization, Affiliated Committee, Joint Fundra	uising Representative	e, or Leadership PAC Sponsor
Mailing Address	824 S MILLEDGE AVENUE SUITE 101		
	ATHENS	, GA	30605
Deletienskin.			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint I	Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identi		Fundraising Represent	Leadership PAC Spons
Designated Agent: Identi		Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identi		Fundraising Represent	
Designated Agent: Identi	fy by name, address (phone number – optional)		
Designated Agent: Identi	fy by name, address (phone number – optional)		

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

ivialility Audiess					
Mailing Address					
ame of Bank, epository, etc.	ilitaliis iuilus.	1 1 1 1 1 1 1 1 1 1		<u> </u>	
anks or Other Depositor afety deposit boxes or ma		or other depositories in wh	ich the committee	e deposits	s funds, holds accounts, rent
			Telephone Num	ber	
TITLE OR POSITION	▼	CITY A		ATE 🛦	ZIP CODE ▲
		OITY			7/0.0005
Mailing Address					
Full Name					
esignated Agent: Identify		(phone number – optiona		epresenta	Leadership PAC St
	Organization		loint Fundraising F		
Relationship:		CITY A		STATE A	ZIP CODE A
	ALEXANDRIA			ı VA ı	22314
Mailing Address	228 S WASHING	TON STREET			
ame of Any Connected HIGGINS VICTOF			indraising Repre	sentative	, or Leadership PAC Spon
4			FEC ID n	lumber	C
3.			FEC ID r		C
2.			FEC ID r		C

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1.		FEC ID number	С
3.			
3.		FEC ID number	С
		FEC ID number	C
<b>A</b>		FEC ID number	С
4.			
lame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e. or Leadership PAC Spons
NRCC COLORAL			
Mailing Address	320 1ST STREET, SE		
Maining 1.55.			
	WASHINGTON	, DC	20003
	WASHINGTON		20003
	CITY  d Organization  Affiliated Committee  Joint  y by name, address (phone number – optional)	STATE ▲ Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Sp
Connected Pesignated Agent: Identify	d Organization Affiliated Committee		
Connected  Pesignated Agent: Identify	d Organization Affiliated Committee		
Connected  Pesignated Agent: Identify  Full Name	d Organization Affiliated Committee		
Connected  Pesignated Agent: Identify  Full Name	d Organization Affiliated Committee		
Connected  Pesignated Agent: Identify  Full Name	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)		Leadership PAC Sp
Pesignated Agent: Identify Full Name Mailing Address	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)  CITY	Fundraising Representa	Leadership PAC Sp