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. Tim Sheehy for Montana PO Box 7209 ADDRESS (number and street) (Check if address is changed) Helena 59604 MT CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address katie@burnttimberconsulting.com is changed) Optional Second E-Mail Address llisker@hdafec.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00844159 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. Type or Print Name of Treasurer Wenetta, Katie,, Date 09 24 2024 Signature of Treasurer Wenetta, Katie, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	e the candidate
Name of Candidate Sheehy, Tim, , ,	
Candidate Party Affiliation REP Office Sought: House X Senate President	State MT District 00
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State (Democratic or subordinate) committee of the Republic	cratic, can, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a:
Corporation Corporation w/o Capital Stock Labor	or Organization
Membership Organization Trade Association Coo	perative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee)	gated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid	d PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Committees Participating in Joint Fundraiser	
1	

	FEC Form 1 (Revised 0	2/2009)	Page 3
W	rite or Type Committee Name		
	Tim Sheehy for I	Montana	
6.	Name of Any Connected O	ganization, Affiliated Committee, Joint Fundraising Representative, or Leader	rship PAC Sponsor
	SHEEHY VICTORY (COMMITTEE	
	Mailing Address	228 S WASHINGTON ST	
		STE 115	
		ALEXANDRIA VA 22314	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
	_		'
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the person in posses	ssion of committee
	Wenetta, K	atie	
	Full Name		
	Mailing Address	PO Box 7209	
		Helena MT 59604	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	STATE	ZIF CODE =
	Treasurer		616
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the resistant treasurer).	name and address of
	Full Name Wenetta, K	atie, , ,	
	or freasurer	PO Box 7209	
	Mailing Address		
		Helena	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		616 3751

FEC Form	1 (Revised 02/2009)	Page 4	ı
Full Name of Designated Agent	Lisker, Lisa, , ,		
Mailing Address	228 S. Washington St.		Ш
	Ste. 115		.
	Alexandria	VA 22314	
Title or Position	CITY ▲	STATE ▲ ZIP CODE ▲	
Assistant Treas	urer Telepho	one number 703 - 549 - 7705	Ш
	Depositories: List all banks or other depositories in which the coxes or maintains funds.	committee deposits funds, holds accounts, rents	
Name of Bank,	Depository, etc.		
	Valley Bank of Helena		
Mailing Address	3030 N Montana Ave		
	Helena	MT 59601	
	CITY ▲	STATE ▲ ZIP CODE ▲	
Name of Bank,	Depository, etc.		
	Chain Bridge Bank		
Mailing Address	1445-A Laughlin Ave		
	McLean	VA 22101	
	CITY ▲	STATE ▲ ZIP CODE ▲	

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

(h). Joint Fundraisi	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	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponse
RICKETTS SHEEHY	VICTORY COMMITTEE		
Mailing Address	228 S WASHINGTON ST		<u> </u>
	STE 115		
	ALEXANDRIA	VA VA	22314
District contract	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Representa	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identif	Affiliated Committee X Jo		
Connecte Designated Agent: Identif	Affiliated Committee X Jo	int Fundraising Representation	Leadership PAC Spo
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Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the control of the	Affiliated Committee X Jo Ty by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds. Bridge Bank	STATE A Telephone Number	ZIP CODE A

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

h). Joint Fundraisi	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 Fund	raising Representative	e, or Leadership PAC Spons
MAJORITY MAKER	S FUND 		
Mailing Address	421 OFFICE PARK DR		
	MOUNTAIN BROOK	AL	35223
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	t Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market.	Affiliated Committee	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	STATE A	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
BATTLEFIELD FUN	D 2023		
Mailing Address	228 S WASHINGTON ST STE 115		1 1 1 1 1 1 1 1 1 1
	ALEXANDRIA	, , VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1			FEC ID n	number	С	_
2.			FEC ID r	number	С	
3.			FEC ID n	number	C	Ξ
4.			FEC ID n	number	C	
-	_	ffiliated Committee, Joint	Fundraising Repre	sentative	e, or Leadership PAC Spo	ons
SHEEHY MAJO	RITY COMMITTEE					
Mailing Address	228 S WASHI	NGTON ST STE 115				ı
	ALEXANDRIA	4		VA I	22314	
Dalatianahin		CITY A	<u> </u>	STATE A	ZIP CODE A	\dashv
Relationship:						
esignated Agent: lo	nected Organization	Affiliated Committee X	Joint Fundraising F	Representa	ative Leadership PAC	Sp
Pesignated Agent: Id				Representa	Leadership PAC	Sp
Con				Representa	Leadership PAC	Sp
resignated Agent: Id				Representa	Ative Leadership PAC	Sp
resignated Agent: Id		ess (phone number – option	al)			Sp
Pesignated Agent: Id	dentify by name, addre		al)	Representa	Leadership PAC ZIP CODE ZIP CODE	Spe

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
-	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
2024 REPUBLICAN	SENATE VICTORY		
Mailing Address	228 S. WASHINGTON STREET		
Ü	SUITE 115		
	ALEXANDRIA	, , , , , VA ,	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		loint Fundraising Representa	
Full Name			
Mailing Address	1		
Mailing Address			
Mailing Address			1
	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	CITY A	1	ZIP CODE A
Mailing Address			
TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of Bank, Chain	ories: List all banks or other depositories in wh	Telephone Number	
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TITLE OR POSITION Banks or Other Depositors of Banks, Chain	ories: List all banks or other depositories in whaintains funds. Bridge Bank	Telephone Number	
TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Chain Depository, etc.	ories: List all banks or other depositories in whaintains funds. Bridge Bank	Telephone Number	

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

(h). Joint Fundrais	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 Fu	ndraising Representative	e, or Leadership PAC Spons
CORNYN VICTORY	COMMITTEE		
Mailing Address	PO BOX 13026		
	AUSTIN		78711
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect		oint Fundraising Represent	ative Leadership PAC Spo
Connect	ed Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident	ed Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Spo
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Funda	aising Representativ	e, or Leadership PAC Spons
RECLAIM THE MAJ	ORITY		
	404 OFFICE PARK PR		
Mailing Address	421 OFFICE PARK DR		
	MOUNTAIN BROOK	AL	35223
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi	Affiliated Committee X Joint by by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
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Pesignated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identif	y by name, address (phone number – optional)		
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Pesignated Agent: Identification Full Name	cories: List all banks or other depositories in which aintains funds. To bridge Bank Bridge Bank	STATE A	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
SENATE PATH TO	VICTORY 2024		
	421 OFFICE PARK DR		
Mailing Address	121 01102171111211		
	BIRMINGHAM	L AL	35223
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	Affiliated Committee X Jointy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Spo
Connecte		nt Fundraising Representa	Leadership PAC Spo
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
_	I Organization, Affiliated Committee, Joint Func	Iraising Representative	e, or Leadership PAC Spons
Mailing Address	901 N WASHINGTON ST		
	SUITE 700		
	ALEXANDRIA	VA	22314
		STATE A	ZIP CODE ▲
	CITY ▲ ed Organization	nt Fundraising Representa	Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Join		ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Join		Leadership PAC Spo
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Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Description of Bank, Depository, etc.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds. Marshall Bank 1625 K Street NW	STATE A	ZIP CODE A

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

(h). Joint Fundraisi n	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
_	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
Mailing Address	228 S. WASHINGTON STREET		
-	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		t Fundraising Represent	ative Leadership PAC Sp
Connected	d Organization Affiliated Committee X Join	t Fundraising Represent	ative Leadership PAC Sp
Connected Designated Agent: Identify	d Organization Affiliated Committee X Join	t Fundraising Represent	ative Leadership PAC Spo
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Connected Designated Agent: Identify Full Name Mailing Address	Affiliated Committee X Join by name, address (phone number – optional) CITY		
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or mail	Affiliated Committee	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fund		e, or Leadership PAC Spons
Mailing Address	PO BOX 9891		
	ARLINGTON	VA	22219
		STATE ▲	ZIP CODE ▲
	CITY A Organization X Affiliated Committee Join by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identify Full Name	I Organization X Affiliated Committee Join		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

ng Participant:		
	FEC ID number	С
	FEC ID number	C
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	FEC ID number	C
	draising Representative	e, or Leadership PAC Spons
101 W ARGONNE DR	1 1 1 1 1 1 1	
#24		
SAINT LOUIS	MO STATE A	63122 ZIP CODE ▲
		tive Leadership PAC Spo
] , , , , - , ,
CITY A	STATE ▲	ZIP CODE ▲
	STATE Telephone Number	ZIP CODE A
	Telephone Number	
pries: List all banks or other depositories in whice aintains funds.	Telephone Number	
	#24 SAINT LOUIS CITY	FEC ID number FEC ID number FEC ID number FEC ID number Organization, Affiliated Committee, Joint Fundraising Representative RICA FUND 101 W ARGONNE DR #24 SAINT LOUIS CITY A STATE A d Organization Affiliated Committee X Joint Fundraising Representative

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

		Participant:				
1				FEC II	O number	С
2				FEC II	O number	С
3				FEC II	O number	С
4.				FEC II	O number	C
Name of An	y Connected O	rganization, Affiliate	ed Committee, Joint	Fundraising Re	presentative	e, or Leadership PAC Spons
FRIEND	S OF KENNED)Y 				
Mailing	g Address	3337 NORTH HULL	EN ST.			
Walling	y Addiess	SUITE 301				
		METAIRIE			LA I	70002
Relatio	onship:		CITY A		STATE A	ZIP CODE ▲
			· · · · · ·		0	
esignated	Agent: Identify I	by name, address (p	hone number – optior	nal)		
Designated Full Nam		oy name, address (p	hone number – optior	nal)		
_	ne 📗 📗	oy name, address (p	hone number – optior	nal)		
Full Nam	ne 📗 📗	oy name, address (p	hone number – option	nal)		
Full Nam	ne 📗 📗	oy name, address (p	hone number – option	nal)		
Full Nam	ne 📗 📗		hone number – option		STATE A	ZIP CODE A
Full Nam	ne					ZIP CODE A

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

h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ROAD TO VICTOR	I Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
TO VIOTOR			
Mailing Address	421 OFFICE PARK DRIVE		
	MOUNTAIN BROOK	AL	35223
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or m	fy by name, address (phone number – optional) CITY CITY pries: 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 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 what intains funds. Bridge Bank	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundrais	ing rantopanti		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connecte	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
BRITT SENATE VIC	CTORY		
Mailing Address	421 OFFICE PARK DR		
	MOUNTAIN BROOK	AL	35223
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name		int Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident		int Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name		int Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ify by name, address (phone number – optional)		
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Depositions of the deposit boxes or recommendations.	ify by name, address (phone number – optional) CITY CITY Cories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit afety deposit boxes or relation between the control of Bank, Depository, etc.	ify by name, address (phone number – optional) CITY CITY Cories: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundraisi	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 Connector	l Organization, Affiliated Committee, Joint Fund	Irojojna Donyogontotiv	o at Loodorchin DAC Spone
ADVANCE THE SEI		iraising nepresentative	e, or Leadership FAC Spons
Mailing Address	421 OFFICE PARK DRIVE		
	MOUTAIN BROOK	AL	35223
		STATE ▲	ZIP CODE ▲
	cd Organization	nt Fundraising Representa	Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Join fy by name, address (phone number – optional)		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional) CITY	nt Fundraising Representa	
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or many many many many many many many many	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite Safety deposit boxes or make the safety deposit boxes or ma	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which aintains funds. Bridge Bank	STATE A	ZIP CODE A

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

1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	, or Leadership PAC Spon
BATTLEGROUND VIO	CTORY 2024		
Mailing Address	PO BOX 13026		
	AUSTIN		78711
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	by name, address (phone number – optional)		
Full Name			
Mailing Address			
Mailing Address			
Mailing Address			
Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	1	STATE A	ZIP CODE A
TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma ame of Bank, Chain E	ries: List all banks or other depositories in which	elephone Number	
TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma ame of Bank, Chain E	ries: List all banks or other depositories in which intains 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 intains funds. Bridge Bank	elephone Number	