**FEC** 

Only

# STATEMENT OF

PAGE 1 / 16

**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Valadao For Congress 5132 North Palm Avenue ADDRESS (number and street) #227 (Check if address is changed) Fresno 93704 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address valleyvision559@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00499392 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 Allen, Melissa,, Date 07 02 2024 Signature of Treasurer Allen, Melissa, , , 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.)	the candidate
Name of Candidate Valadao, David, , ,	
Candidate Party Affiliation  REP  Office Sought:  House  Senate  President	State CA  District 22
(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 or subordinate) committee of the Republication	atic, an, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	cted organization is a:
Corporation Corporation w/o Capital Stock Labor	Organization
Membership Organization Trade Association Coope	erative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee. (i.e., nonconnected committee)	ated 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	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.	o or more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Committees Participating in Joint Fundraiser	
1 C	

	FEC Form 1 (Revised 0	2/2009)			Page <b>3</b>
٧	Vrite or Type Committee Name				
	Valadao For Cor	ngress			
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fu	ındraising Represe	ntative, or Leader	ship PAC Sponsor
	Vitoria PAC				
	Mailing Address	5132 North Palm Avenue			
		#227	1 1 1 1 1 1 1		
		Fresno	1	CA 93704	[-]
		CITY ▲	ST.	ATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization	Joint Fundraising Re	epresentative	Leadership PAC Sponso
7.		ify by name, address (phone number option	al) and position of the	e person in posses	sion of committee
	books and records.				
	Allen, Melis	ssa, , ,			
	Full Name				
	Mailing Address	5132 N Palm Ave #227			
		1			
		Fresno		CA   93704	1 1
	Till and Destition	CITY ▲	ST	ATE A	ZIP CODE ▲
	Title or Position ▼			040	5.40
	Record Keeper		Telephone number	. 916 – [	548   -   2825
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	treasurer of the co	mmittee; and the n	ame and address of
	Full Name Allen, Melis	ssa, , ,			
	of Treasurer				
	Mailing Address	5132 N Palm Ave #227			
		Fresno		CA   93704	-
		CITY ▲	ST	ATE A	ZIP CODE ▲
	Title or Position ▼				
	Treasurer	1	Telephone number	916	548

FEC Form 1	(Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits function or maintains funds.	ds, holds accounts, rents
Name of Bank, D	epository, etc.	
	Fresno First Bank	
Mailing Address	7690 North Palm Avenue	
	Fresno CA	93711
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
	Chain Bridge Bank	
Mailing Address	1445-A Laughlin Ave	
	McLean   VA	22101
	CITY ▲ STATE ▲	ZIP CODE ▲

Dogo	of	16	
Page	of		

h). Joint Fundraisi	ig Faiticipalit.		
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 Fun	draising Representativ	e, or Leadership PAC Spon
Mailing Address	228 S Washington St Ste 115		
	Alexandria		22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joi	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee X Jointy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	by by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identification of the serious part of the serious	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 mane of Bank, epository, etc	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whice aintains funds.  Fargo Bank	STATE A Telephone Number	ZIP CODE A

Paga	of	16	
Page	OI		

1			FEC ID	number	С
2.			FEC ID	number	С
3.			FEC ID	number	C
4.			FEC ID	number	С
			_		
Name of Any Con	nected Organization	Affiliated Committee, Joint	Fundraising Repr	esentative	e, or Leadership PAC Spons
American Battle	eground Fund				
		1 1 1 1 1 1 1 1 1			1 1 1 1 1 1 1 1 1
Mailing Addre	PO Box 30	844			
Mailing Addres					
	Bethesda			ı MD ı	20824
B. Latter and					
Relationship:		CITY A		STATE A	ZIP CODE ▲
	Identify by name, ad	dress (phone number – option	Joint Fundraising		
esignated Agent:	Identify by name, ad				
Pesignated Agent:	Identify by name, ad				
esignated Agent:	Identify by name, ad				
Pesignated Agent:	Identify by name, ad		nal)	TATE A	ZIP CODE A
Designated Agent:  Full Name  Mailing Address	Identify by name, ad	dress (phone number – option	nal)	TATE A	ZIP CODE A

Paga	of	16	
Page	OI		

h). <b>Joint Fundraisi</b>	ng Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected  Emmer Majority Buil	l Organization, Affiliated Committee, Joint Fund ders	draising Representative	e, or Leadership PAC Spon
Mailing Address	824 S. Milledge Ave. Ste. 101		
	Athens	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Jointy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Representation	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 Deposite afety deposit boxes or management of the control of the	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   Ories: List all banks or other depositories in which aintains funds.  Fargo Bank - New	STATE A Telephone Number	ZIP CODE A

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

Page \_\_\_ **of** \_\_\_\_

ddress	PO Box 30844 Bethesda Organization	filiated Committee  CITY   Affiliated Committee			number (	C C C C C C C C C C C C C C C C C C C	Spons
ddress  hip:	PO Box 30844  Bethesda	CITY A		FEC ID n	sentative,	or Leadership PAC	Spons
ddress  hip:	PO Box 30844  Bethesda	CITY A		FEC ID n	sentative,	or Leadership PAC	Spons
ddress  hip:	PO Box 30844  Bethesda	CITY A		aising Repre	sentative,	or Leadership PAC	Spons
ddress  hip:	PO Box 30844  Bethesda	CITY A			MD	20824	Spons
ddress  hip:	PO Box 30844  Bethesda	CITY A			MD	20824	Spons
hip: Connected	Bethesda	-		\$			
hip: Connected	Bethesda	-		\$			
hip: Connected	Bethesda	-		s			
Connected		-		s			
Connected		-		s			
Connected	Organization	-		S	TATE A		
	Organization	Affiliated Committee			IAIE	ZIP CODE	<b>A</b>
dress							
POSITION	•	CITY A		STA	ATE 🔺	ZIP CODE	<b>A</b>
			Tel	lephone Num	ber		
	er Depositorio	POSITION ▼  er Depositories: List all bank boxes or maintains funds.  Truist - VA	POSITION ▼  CITY ▲  Pr Depositories: List all banks or other depositories or maintains funds.  Truist - VA	POSITION ▼  CITY ▲  Tel  Per Depositories: List all banks or other depositories in which to boxes or maintains funds.  Truist - VA	POSITION ▼  CITY ▲ ST.  Telephone Num  Per Depositories: List all banks or other depositories in which the committee boxes or maintains funds.  Truist - VA	POSITION ▼  CITY ▲ STATE ▲  Telephone Number  Per Depositories: List all banks or other depositories in which the committee deposits boxes or maintains funds.  Truist - VA	POSITION ▼  CITY ▲  STATE ▲  ZIP CODE A  Telephone Number  Pr Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts boxes or maintains funds.  Truist - VA

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

Page \_\_\_ **of** \_\_\_\_\_

(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
lame of Any Connected	l Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
Scalise Leadership F	Fund 2024		
Mailing Address	320 1st St SE		
	Washington	DC	20003
Deletienskin	CITY A	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connecte  Pesignated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connected Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connected Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connected Agent: Identi	Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Spo
Connected Agent: Identification of the Agent identificatio	Affiliated Committee X Join fy by name, address (phone number – optional)  CITY		
Connected Agent: Identification of the Identification of the Identification of the Identification of th	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 Pesignated Agent: Identification of Bank, Depository, etc.	Affiliated Committee X Join fy by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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

Page \_\_\_ **of** \_\_\_\_

1.			
		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
4.			
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representativ	e, or Leadership PAC Spons
Farmers for the Valley	PAC		
Mailing Address	9460 Tegner Road		
	Hilmar	CA	95324
		STATE ▲	ZIP CODE ▲
	Organization	nt Fundraising Represent	ative Leadership PAC Sp
Connected	Organization Affiliated Committee X Join		ative Leadership PAC Sp
Connected  Pesignated Agent: Identify	Organization Affiliated Committee X Join		ative Leadership PAC Sp
Connected  Designated Agent: Identify  Full Name	Organization Affiliated Committee X Join		ative Leadership PAC Sp
Connected  Designated Agent: Identify  Full Name	Organization Affiliated Committee X Join		ative Leadership PAC Sp
Pesignated Agent: Identify  Full Name  Mailing Address	Organization Affiliated Committee X Join by name, address (phone number – optional)		ative Leadership PAC Sp
Connected  Designated Agent: Identify  Full Name	Organization Affiliated Committee X Join by name, address (phone number – optional)  CITY	nt Fundraising Represent	

Paga	of	16	
Page	OI		

1				FEC II	D number	C	
2				FEC II	D number	С	
3.				FEC II	D number	С	
4.	1 1 1 1 1	1 1 1 1		   FEC II	D number	С	
lama of A	my Connected (	Overanization A	ffiliated Committee, Joint	Eundraining Do	nrocentativ	o ar Loodorobir	DAC Spans
	adao Victory F	_	innated Committee, John	rundraising ne	<u>                                      </u>	e, or Leadership	PAC Spoils
Mailin	g Address	5132 N Palm	Ave #227				
		Fresno		, , , , I	CA	93704	-   -
			CITY ▲		STATE A	ZIP	CODE A
		Organization by name, addre		Joint Fundraisin	g Representa	ative Leade	ership PAC Sp
	Connected  Agent: Identify		Affiliated Committee		g Representa	ative Leade	ership PAC Sp
esignated Full Nar	Connected  Agent: Identify		Affiliated Committee		g Representa	Leade	ership PAC Sp
esignated Full Nar	Connected  Agent: Identify  me		Affiliated Committee		g Representa	Leade	ership PAC Sp
esignated Full Nar	Connected  Agent: Identify  me		Affiliated Committee		g Representa	Leade	ership PAC Sp
esignated Full Nar Mailing	Connected  Agent: Identify  me	by name, addre	Affiliated Committee		g Representa		ership PAC Sp

Paga	of	16	
Page	OI		

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 Representative	e, or Leadership PAC Sponsor
Hispanic Leadership 1	rust Partnership		
Mailing Address	PO Box 341027		
	1		
	Austin	, TX	78734
Relationship:	CITY A	STATE A	ZIP CODE A
Troidionomp.			
	Organization Affiliated Committee X J by name, address (phone number – optional)	oint Fundraising Represent	Leadership FAC Spor
			Leadership FAC Spor
Designated Agent: Identify			Leadership FAC Spot
Designated Agent: Identify  Full Name			Leadership FAC Spor
Designated Agent: Identify  Full Name			Leadership FAC Spot
Designated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)		ZIP CODE A
Designated Agent: Identify  Full Name	by name, address (phone number – optional)		

Page	of	16	
rage	UI		

h). <b>Joint Fundraisi</b>	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected Scott Franklin Wingn	Organization, Affiliated Committee, Joint F nan Fund	undraising Representativ	e, or Leadership PAC Spon
Mailing Address	P.o. Box 2811		
	Lakeland	FL L	33806
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee X  y by name, address (phone number – optional	Joint Fundraising Represent	Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif  Full Name    Mailing Address	y by name, address (phone number – optiona		Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optiona	l)	
esignated Agent: Identification  Full Name	y by name, address (phone number – optional content of the content	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 m  ame of Bank,	y by name, address (phone number – optional content of the content	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional content of the content	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional content of the content	STATE A  Telephone Number	ZIP CODE A

Page	of	16	
rage	OI		

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
		<u> </u>	
ame of Any Connected	d Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spon
Grow the Majority			
Mailing Address	228 S Washington St Ste 115		
Mailing Address			
	Alamadria		00044
	Alexandria	L VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee X fy by name, address (phone number – option	Joint Fundraising Represental)	tative Leadership PAC S
			Leadership PAC S
esignated Agent: Identi			Leadership PAC S
esignated Agent: Identi			Leadership PAC S
esignated Agent: Identi			Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – options		Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – options	al)	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – options	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – options  CITY ▲  Ories: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification of the property of the property of the property of the property deposit boxes or make the	fy by name, address (phone number – options  CITY ▲  Ories: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – options)  CITY   CITY   ories: List all banks or other depositories in what intains funds.	STATE  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 – options)  CITY   CITY   ories: List all banks or other depositories in what intains funds.	STATE  Telephone Number  which the committee deposit	ZIP CODE A  ts funds, holds accounts, ren
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 – options)  CITY   CITY   ories: List all banks or other depositories in what in a funds.	STATE  Telephone Number  which the committee deposit	ZIP CODE A  ts funds, holds accounts, ren
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 – options)  CITY   CITY   ories: List all banks or other depositories in what in a funds.	STATE  Telephone Number  which the committee deposit	ZIP CODE A  ts funds, holds accounts, ren

Page	of	16	
rage	OI		

h). <b>Joint Fundraisi</b>	ig i artiolpariti		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Ropresentativ	o or Leadershin BAC Snon
Protect the House 20		indicating representativ	., or Ecaucismp 120 open
Mailing Address	PO Box 30844		
	Bethesda	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X	loint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	y by name, address (phone number – optiona		
esignated Agent: Identi	by by name, address (phone number – optiona		Leadership PAC Sp
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	by by name, address (phone number – optiona		
esignated Agent: Identii  Full Name	y by name, address (phone number – optiona  CITY   CITY   pries: List all banks or other depositories in whaintains 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 and ame of Bank,	y by name, address (phone number – optiona  CITY   CITY   pries: List all banks or other depositories in whaintains 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 mane of Bank, epository, etc.	y by name, address (phone number – optiona  CITY   CITY   Ories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number  ich the committee deposit	ZIP CODE A

Paga	of	16	
Page	OI		

1.	g Participant:			
		Ff	EC ID number	C
2.		FI	EC ID number	C
3.		Ff	EC ID number	C
4.		 	EC ID number	С
Name of Any Connected	Organization, Affiliated Committe	e, Joint Fundraisine	g Representative	e, or Leadership PAC Sponsor
Protect the House Cal	ifornia 2024			
Mailing Address	PO Box 30844			
	Bethesda		MD	20824
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
П	Organization Affiliated Commi	🗸 = .	raising Representa	ative Leadership PAC Spons
Full Name				
Mailing Address				
	1			I I-I
TITLE OR POSITION	CITY A		STATE ▲	ZIP CODE ▲
I CONTROLL	· 			
		Telepho	ne Number	-   -