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. GOP Senate Victory 2020 228 S. Washington St. ADDRESS (number and street) Ste. 115 (Check if address is changed) Alexandria 22314 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS llisker@hdafec.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2020 C00757708 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Lisker, Lisa, , , Type or Print Name of Treasurer Lisker, Lisa,,, [Electronically Filed] 09 08 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Car	ndidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Nam Can	e of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Nam Can	e of didate		
Par	ty Con	nmittee:	
(d)			Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	•
(f)			areasted fund or north
(f)	Ш	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	COLLINS FOR SENATOR	314575
	2.	STEVE DAINES FOR MONTANA FEC ID number C C004	91357
	3.	JONI FOR IOWA C C005	46788
	4.	CORY GARDNER FOR SENATE	92454

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Write or Type Committee Name		
GOP Senate Vi	ctory 2020	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
NONE		
		_
Mailing Address		
	CITY STATE :	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor
 Custodian of Records: Idea books and records. 	ntify by name, address (phone number optional) and position of the person in poss	session of committee
Lisker, Lis	a, , ,	1
Full Name Mailing Address	228 S. Washington St.	
•	Ste. 115	.
	Alexandria VA 22314	
Title or Position	CITY STATE 2	ZIP CODE
Treasurer		549 - 7705
3. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the nan assistant treasurer).	ne and address of
Full Name Lisker, Lis of Treasurer	a, , ,	
Mailing Address	228 S. Washington St.	
	Ste. 115	
	Alexandria VA 22314	
Title or Position		CIP CODE
Treasurer		49 - 7705

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
	Depository, etc.	
	Depository, etc. Truist/BB&T 1909 K St., NW	6
Name of Bank,	Depository, etc. Truist/BB&T 1909 K St., NW	6 ZIP CODE
Name of Bank, Mailing Address	Depository, etc. Truist/BB&T 1909 K St., NW Washington DC 20006	
Name of Bank, Mailing Address	Depository, etc. Truist/BB&T 1909 K St., NW Washington CITY STATE	
Name of Bank, Mailing Address	Depository, etc. Truist/BB&T 1909 K St., NW Washington CITY STATE Depository, etc.	
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Truist/BB&T 1909 K St., NW Washington CITY STATE Depository, etc.	
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Truist/BB&T 1909 K St., NW Washington CITY STATE Depository, etc.	

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

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MCSALLY FOR	SENATE INC		FEC ID number	C C00666040
THOM TILLIS C	OMMITTEE		FEC ID number	C C00545772
KANSANS FOR	MARSHALL		FEC ID number	C C00576173
4. TUBERVILLE FO	OR SENATE, INC.		FEC ID number	C C00701672
ame of Any Connected C	Organization, Affiliated Com	imittee, Joint Fundrai	sing Representativ	ve, or Leadership PAC Spon
Mailing Address				
Relationship:	CIT	Y 🛦	STATE A	ZIP CODE ▲
	Organization Affiliated Co		undraising Represen	tative Leadership PAC Sp
	_		undraising Represen	tative Leadership PAC Sp
esignated Agent: Identify	_		undraising Represen	tative Leadership PAC Sp
esignated Agent: Identify Full Name	_		undraising Represen	tative Leadership PAC Sp
esignated Agent: Identify Full Name	_		undraising Represen	tative Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone no	umber — optional)	undraising Represen	tative Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	by name, address (phone no	umber – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositori afety deposit boxes or main	by name, address (phone not be address). CITY	umber – optional)	STATE A	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositori affety deposit boxes or main ame of Bank, epository, etc.	by name, address (phone not be address). CITY	umber – optional)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositori afety deposit boxes or main	by name, address (phone not be address). CITY	umber – optional)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositori affety deposit boxes or main ame of Bank, epository, etc.	by name, address (phone not be address). CITY	umber – 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)	or(h). Joint Fundraisin	g Participant:		
,	PERDUE FOR		FEC ID number	C C00547570
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
	Mailing Address	1		
	Mailing Address			
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee Join	t Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	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		
8.	Full Name	CITY A	STATE A	
 8. 9. 	Full Name	CITY A ries: List all banks or other depositories in which	STATE A	ZIP CODE ▲
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY A ries: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE ▲
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY A ries: List all banks or other depositories in which intains funds.	STATE A relephone Number the committee deposits	ZIP CODE ZIP CODE s funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A ries: List all banks or other depositories in which intains funds.	STATE A relephone Number the committee deposits	ZIP CODE ZIP CODE s funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A ries: List all banks or other depositories in which intains funds.	STATE A relephone Number the committee deposits	ZIP CODE ZIP CODE s funds, holds accounts, rents