FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. REPUBLICAN PARTY OF ARIZONA, LLC 3033 N CENTRAL AVE ADDRESS (number and street) SUITE 300 (Check if address is changed) **PHOENIX** 85012 ΑZ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address ENORTON08@GMAIL.COM is changed) Optional Second E-Mail Address INFO@CAMPAIGNFINANCIAL.COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00008227 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer NORTON, ELIJAH, , NORTON, ELIJAH, , , 06 06 2024 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

EC For	rm 1 (Revised 03/2022)	Page 2
. TYPE	E OF COMMITTEE:	
Cano	didate Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	candidate
	ame of andidate	
	ondidate Office Intry Affiliation Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
Party	ty Committee:	
(d)	X This committee is a STA (National, State or subordinate) committee of the REP (Democratic, Republican, e	etc.) Party
Polit	tical Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	organization is a:
	Corporation Corporation w/o Capital Stock Labor Org	ganization
	Membership Organization Trade Association Cooperation	ve
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	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	S).
	In addition, this committee is a Lobbyist/Registrant PAC.	
Join	nt Fundraising Representative:	
(i)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(j)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
Co	Committees Participating in Joint Fundraiser	
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	FEC Form 1 (Revised	·	Page 3
V	Vrite or Type Committee Nan		
		PARTY OF ARIZONA, LLC	
6.		Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
	CISCOMANI VICTO	JRY FUND 	
	Mailing Address	P.O. BOX 35103	
		TUCSON	85740
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connecte	ed Organization Affiliated Organization X Joint Fundraising Represen	ntative Leadership PAC Sponso
7.	Custodian of Records: Ide	entify by name, address (phone number optional) and position of the perso	on in possession of committee
	CFS. Co	ompliance, , ,	
	Full Name		
	Mailing Address	PO Box 30844	
		Bethesda MD	20824
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Custodian of Record	Telephone number	301 654 3220
8.	Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee, assistant treasurer).	e; and the name and address of
	Full Name NORTO of Treasurer	N, ELIJAH, , ,	
	Mailing Address	17767 N. PERIMETER DRIVE	
		SUITE B101	
		SCOTTSDALE	85255
		OITY A	7ID CODE A
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲

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Telephone number

239

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FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent	Swoboda, Gina, , ,		
Mailing Address	3033 N Central Ave Suite 300 Phoenix		85012
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Chairwoman	Telep	phone number	
	Depositories: List all banks or other depositories in which the xes or maintains funds.	e committee deposits fund	s, holds accounts, rents
Name of Bank, D	Depository, etc.		
	WELLS FARGO		
Mailing Address		, , AZ , , {	85043
	PHOENIX CITY	STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.		
	CHAIN BRIDGE BANK		
Mailing Address	1445A LAUGHLIN AVE		
	MCLEAN	VA 2	22101
	CITY ▲	STATE ▲	ZIP CODE ▲

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h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
PROTECT THE HOU	JSE 2024 		
Mailing Address	PO BOX 30844		<u> </u>
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Jointy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
		nt Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address	by by name, address (phone number – optional) CITY		
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4.				FEC	ID number	C	
	ny Connected (/ICTORY	Organization, Affi	liated Committee, Joint	Fundraising R	epresentativ	e, or Leadership PAC S	Spons
Mailin	g Address	228 S WASHING	GTON ST				
		STE 115					
		ALEXANDRIA		, , , , , ,	VA	22314	1 1
Relation	onship:		CITY A		STATE A	ZIP CODE	A
		Organization by name, address	Affiliated Committee	X Joint Fundraisi	ng Represent	ative Leadership PA	AC Sp
	Agent: Identify				ng Represent	ative Leadership PA	AC Sp
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Designated Full Nar	Agent: Identify				ng Represent	ative Leadership PA	AC Spe
esignated Full Nar	Agent: Identify				ng Represent	ative Leadership PA	AC Spe
Full Nar	Agent: Identify	by name, address			ng Represent	ative Leadership PA	

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h). Joint Fundraisi	ng Participant:		
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3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON ST STE 115		
Relationship:	ALEXANDRIA CITY	VA STATE ▲	22314 ZIP CODE ▲
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
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esignated Agent: Identif	by by name, address (phone number – optional) CITY		
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	g Participant:		
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4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
TRUMP 47 COMMIT	TEE		
Mailing Address	P.O. BOX 509		
Mailing Addiess			, , , , , , , , , , ,
	ARLINGTON	ı VA ı	22216
Relationship:	CITY A	STATE A	ZIP CODE A
		int Fundraising Represent	
esignated Agent: Identify	by name, address (phone number – optional)		
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	STATE A	ZIP CODE A
Full Name	CITY	STATE A Telephone Number	ZIP CODE A
Full Name	CITY A		ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	CITY ▲ ries: List all banks or other depositories in which intains funds.	Telephone Number	s funds, holds accounts, ren
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lame of Any Conne	ected Organization, A	Affiliated Committee, Joint	Fundraising Rep	resentativ	e, or Leadership	PAC Spons
KARI LAKE VIC	TORY FUND					1 1 1 1
	PO BOX 343	41				
Mailing Address	FO BOX 343	41				
	PHOENIX			AZ	85067	
		OITV +		STATE A	ZIP	CODE ▲
	nected Organization	CITY A Affiliated Committee ess (phone number – option	Joint Fundraising		ative Leader	
Con		Affiliated Committee X			ative Leader	
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