**FEC** 

## 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. Laxalt Victory Committee 50 S Jones Blvd #201 ADDRESS (number and street) (Check if address is changed) Las Vegas 89107 NV CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS cameron@incompliance.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 25 2022 C00802371 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. Phillips, Cameron, , , Type or Print Name of Treasurer Phillips, Cameron, , , [Electronically Filed] 01 25 2022 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 Only

Local 202-694-1100

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		OF COMMITTEE				
Car	ndidate	date 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. (Complete the candidate information below.)				
	ne 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			
	ne 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 W/o Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.	•			
(f)		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	nt 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			
	Committees Participating in Joint Fundraiser					
	1.	LAXALT FOR SENATE FEC ID number C C00	787135			
	2.	NEVADA REPUBLICAN CENTRAL COMMITTEE  FEC ID number C C000	082925			
	3.	FEC ID number				
	4.					

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Write or Type Committee Name							
Laxalt Victory C	ommittee						
	ganization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor					
NONE							
Mailing Address							
	CITY STATE	ZIP CODE					
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representation	tive Leadership PAC Sponsor					
<ol> <li>Custodian of Records: Identi books and records.</li> </ol>	ify by name, address (phone number optional) and position of the pe	erson in possession of committee					
Phillips, Ca	meron, , ,						
	50 S Jones Blvd #201						
Mailing Address	1						
	Las Vegas , NV ,	89107					
Title or Position	CITY STATE	ZIP CODE					
Treasurer	Telephone number	02   -   259   -   5559					
3. <b>Treasurer:</b> List the name and any designated agent (e.g., as	<b>Treasurer:</b> List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).						
Full Name Phillips, Cal	neron, , ,						
	50 S Jones Blvd #201						
Mailing Address							
	Las Vegas NV I	180107					
		89107					
	CITY STATE	ZIP CODE					

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Full Name of Designated Agent							
Mailing Address							
	CITY STATE Z	IP CODE					
Title or Position	Telephone number =						
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Bank of Nevada							
Mailing Address	8505 Centennial Pkwy						
	Las Vegas NV 89149						
	CITY STATE Z	ZIP CODE					
Name of Bank, Depository,	etc.						
Mailing Address							
	CITY STATE Z	ZIP CODE					