FEC

Only

STATEMENT OF **ORGANIZATION**

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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 04 23 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

E	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 the conformation below.)	andidate
	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 or subordinate) committee of the (Democratic, Republican, et	c.) Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	organization is a:
	Corporation Corporation w/o Capital Stock Labor Orga	nization
	Membership Organization Trade Association Cooperative	Э
	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 from committee. (i.e., nonconnected committee)	und 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 or n committees/organizations, at least one of which is an authorized committee of a federal candidate.	nore political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or n committees/organizations, none of which is an authorized committee of a federal candidate.	nore political
	Committees Participating in Joint Fundraiser	
	1 C	

	FEC Form 1 (Revised 0	2/2009)	Page 3
V	/rite or Type Committee Name		
	Tim Sheehy for I	Montana	
3.	Name of Any Connected O	ganization, Affiliated Committee, Joint Fundraising Representative, or Leader	ership PAC Sponsor
	SHEEHY VICTORY	COMMITTEE	
	Mailing Address	228 S WASHINGTON ST	
		STE 115	
		ALEXANDRIA VA 22314	4
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization	Leadership PAC Sponso
	_		
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the person in posse	ssion of committee
	Wenetta, K	atie, , ,	
	Full Name	 	
	Mailing Address	PO Box 6456	
		Helena	<u>;</u>
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		616 - 3751
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 issistant treasurer).	name and address of
	Full Name Wenetta, K	atie, , ,	1
	of Treasurer	PO Box 6456	
	Mailing Address	0 500 0400	
		Helena	1
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		616 - 3751

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated	Lisker, Lisa, , ,		
Agent			
Mailing Address	228 S. Washington St.		
	Ste. 115		
	Alexandria	\	22314
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasu		number 70:	3 549 7705
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the commes or maintains funds.	ittee deposits fu	nds, holds accounts, rents
Name of Bank, D	epository, etc.		
	Valley Bank of Helena		
Mailing Address	3030 N Montana Ave		
	Helena	MT	59601
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Chain Bridge Bank		
Mailing Address	1445-A Laughlin Ave		
	McLean	L VA	22101
	CITY ▲	STATE ▲	ZIP CODE ▲

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

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(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 contacts	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Representa	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Spo
Connected Connected Pesignated Agent: Identification	d Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Spo
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Connecte Designated Agent: Identif	Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Spo
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
Mailing Address	421 OFFICE PARK DR		
	MOUNTAIN BROOK	AL	35223
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Sp
Connecte		nt Fundraising Representa	Leadership PAC Sp
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(h). Joint Fundrais	ng Participant:		
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2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
_	d Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
BATTLEFIELD FUN	D 2023		
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA		22314
Dallaria adda	CITY A	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
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4.			FEC ID n	number	C	
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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
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resignated Agent: Id		ess (phone number – option	al)			Sp
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(h). Joint Fundrais	ng raiticipant.		
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-	d Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
2024 REPUBLICAN	SENATE VICTORY		
Mailing Address	228 S. WASHINGTON STREET		
a g ar ar	SUITE 115		
	ALEXANDRIA	, VA	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Jo	int Fundraising Representa	ative Leadership PAC Spo
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(h). Joint Fundraisi	ng Participant:		
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Jame of Any Connected	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
CORNYN VICTORY			
Mailing Address	PO BOX 13026		
	AUSTIN	TX	78711
		STATE ▲	ZIP CODE ▲
	CITY ▲ ed Organization	nt Fundraising Representa	ative Leadership PAC Sp
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Mailing Addre	421 OFFIC	E PARK DR			
		N BROOK	A	L	35223
	MOUNTAIN				
	onnected Organization	CITY A Affiliated Committee	STAT Joint Fundraising Repr (al)		ZIP CODE ▲ Leadership PAC Sp
Co	onnected Organization	Affiliated Committee X	Joint Fundraising Repr		
Cco	Identify by name, ad	Affiliated Committee X	Joint Fundraising Repr		
Designated Agent:	Identify by name, ad	Affiliated Committee X	Joint Fundraising Repr		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ALEXANDRIA				22314
tionship:		CITY A		STATE A	ZIP CODE ▲
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			Telephone Nu	mber	- - .
	ASSO SHEEHY Ing Address tionship: Connected d Agent: Identify ame Address	ASSO SHEEHY VICTORY COMMIT 901 N WASHINGTON SUITE 700 ALEXANDRIA tionship: Connected Organization Affilia d Agent: Identify by name, address (pho	ASSO SHEEHY VICTORY COMMITTEE 901 N WASHINGTON ST SUITE 700 ALEXANDRIA Connected Organization Affiliated Committee AGAGENT: Identify by name, address (phone number – options ame AGAGENT: AGAGENTE AGAGENTA	ASSO SHEEHY VICTORY COMMITTEE 1 901 N WASHINGTON ST SUITE 700 ALEXANDRIA 1 tionship: CITY Connected Organization Affiliated Committee X Joint Fundraising 1 Agent: Identify by name, address (phone number – optional) 1 ame	ame G Address 901 N WASHINGTON ST SUITE 700 ALEXANDRIA CITY ▲ STATE ▲ Connected Organization Affiliated Committee