**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. NRSC 425 2ND STREET NE ADDRESS (number and street) (Check if address is changed) WASHINGTON 20002 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address kbroghamer@nrsc.org is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 10 30 2025 C00027466 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 BROGHAMER, KRISTI,, BROGHAMER, KRISTI, , , Date 10 30 2025 Signature of Treasurer 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

FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate 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. (Compline information below.)	ete the candidate
Name of Candidate	
Candidate Party 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 Committee:	
(d) V This committee is a NAT ` REP `	ocratic, olican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a:
Corporation Corporation w/o Capital Stock La	bor Organization
Membership Organization Trade Association Co	poperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee)	regated 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 (Hyb	orid 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 committees/organizations, at least one of which is an authorized committee of a federal candidate	•
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundraiser	
1	

	FEC Form 1 (Revised 0.	2/2009)	Page 3
٧	Vrite or Type Committee Name		
	NRSC		
3.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
	YOUNG VICTORY C	OMMITTEE	
	Mailing Address	PO BOX 3743	
		I	1
		CARMEL   IN   46082	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization	Leadership PAC Sponso
7.	Custodian of Records: Identi	fy by name, address (phone number optional) and position of the person in possess	ion of committee
	DDOOUAN	IED KOIOTI	
	Full Name	IER, KRISTI, , ,	1
	Mailing Address	425 2ND STREET NE	
		I	1
		WASHINGTON   DC   20002	
		WASHINGTON BC 20002	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	TREASURER		675 6000
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 naissistant treasurer).	ame and address of
	Full Name BROGHAN	IER, KRISTI, , ,	
	of Treasurer		
	Mailing Address	425 2ND STREET NE	
			<u> </u>
		WASHINGTON DC 20002	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	TREASURER		675

	FEC Form 1	(Revised 02/2009)		Page <b>4</b>
	Full Name of Designated Agent	BROGHAMER, KRISTI, , ,		
	Mailing Address	425 2ND STREET NE		
		WASHINGTON	DC	20002
	Title or Position <b>▼</b>	CITY ▲	STATE ▲	ZIP CODE ▲
	TREASURER		none number 202	675 6000
-	Banks or Other safety deposit box	<b>Depositories:</b> List all banks or other depositories in which the ses or maintains funds.	committee deposits fun	ds, holds accounts, rents
	Name of Bank, D	epository, etc.		
		BANK OF NEVADA		
	Mailing Address	8505 CENTENNIAL PKWY		
		LAS VEGAS	NV	89148
		CITY A	STATE ▲	ZIP CODE ▲
	Name of Bank, D	epository, etc.		
		BB&T		
	Mailing Address	1909 K STREET NW		
		WASHINGTON	DC	20006
		CITY A	STATE ▲	ZIP CODE ▲

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

(h). Joint Fundraisi	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
SMILEY VICTORY I	FUND		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		1
	ALEXANDRIA	VA	22314
		STATE A	ZIP CODE ▲
	CITY ▲  ed Organization	nt Fundraising Representa	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Joi		Leadership PAC Spo
Connecte  Pesignated Agent: Identi	ed Organization Affiliated Committee X Joi		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Joi		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Joi	nt Fundraising Representa	
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Joi ify by name, address (phone number – optional)		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	ed Organization Affiliated Committee X Joi ify by name, address (phone number – optional)	nt Fundraising Representa	
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION CONTROL OF THE PROPERTY OF T	ed Organization Affiliated Committee X Joi ify by name, address (phone number – optional)  CITY ▲  Ories: List all banks or other depositories in which	STATE   Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Deposit afety deposit boxes or make the property of the prop	Affiliated Committee X Jointify by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which naintains funds.  S FARGO	STATE   Telephone Number	ZIP CODE A

Page	of <sup>66</sup>
rage	OI

	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	l Organization, Affiliated Committee, Joint Fur	ndraising Representative	or Leadershin PAC Snons
VANCE VICTORY	Organization, Anniated Committee, Comit Fall		, or Education Price openio
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	, , , ,   VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte  Designated Agent: Identi	Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	
Designated Agent: Identi			
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			
Designated Agent: Identi  Full Name   Mailing Address	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Identi  Full Name   Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)		
Pesignated Agent: Identic Full Name Mailing Address  TITLE OR POSITION Mailing Address  Banks or Other Deposit Eafety deposit boxes or mailing and mailing and mailing Address	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which aintains funds.  OF AMERICA	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white aintains funds.  OF AMERICA	STATE   Telephone Number  ch the committee deposit	ZIP CODE A

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

(h). <b>Joint Fundraisi</b>	• .			
1.		FEC ID nur	mber (	
2.		FEC ID nur	mber (	
3		FEC ID nur	mber (	
4.		FEC ID nur	mber (	
lame of Any Connected	Organization, Affiliated Committee, Jo	int Fundraising Represe	ntative,	or Leadership PAC Spons
RUBIO VICTORY CO	OMMITTEE			
Mailing Address	228 S WASHINGTON STREET SUITE	115		
J				
	ALEXANDRIA		VA I	22314
Relationship:	CITY ▲	STA	J ATE ▲	ZIP CODE ▲
				211 00DL <b>2</b>
Connecte	d Organization Affiliated Committee  y by name, address (phone number – or	X Joint Fundraising Rep	presentativ	ve Leadership PAC Sp
Connecte	d Organization Affiliated Committee	X Joint Fundraising Rep	presentativ	ve Leadership PAC Sp
Connecte  Designated Agent: Identif	d Organization Affiliated Committee	X Joint Fundraising Rep	presentativ	ve Leadership PAC Sp
Connecte  Designated Agent: Identif	d Organization Affiliated Committee	X Joint Fundraising Rep	presentativ	Leadership PAC Sp
Pesignated Agent: Identification  Full Name  Mailing Address	d Organization Affiliated Committee  y by name, address (phone number – or	X Joint Fundraising Rep		Leadership PAC Sp
Connecte  Designated Agent: Identif	d Organization Affiliated Committee  y by name, address (phone number – or	X Joint Fundraising Reportional)	E A	

Dogo	of 66
Page	of oo

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
PETE RICKETTS VI	CTORY FUND		
Mailing Address	1327 H STREET		
	STE 101		
	LINCOLN	NE	68508
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Spo
	d Organization Affiliated Committee X J		ative Leadership PAC Spo
			Leadership PAC Spo
Designated Agent: Identif			Leadersnip PAC Spo
Pesignated Agent: Identif			Leadersnip PAC Spo
Pesignated Agent: Identif			Leadership PAC Spo
Pesignated Agent: Identife  Full Name  Mailing Address	y by name, address (phone number – optional)		ZIP CODE A
Pesignated Agent: Identif	y by name, address (phone number – optional)		
Pesignated Agent: Identife  Full Name  Mailing Address	by by name, address (phone number – optional)	STATE A	
Pesignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Janks or Other Deposite afety deposit boxes or m	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or mailing and	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification of Bank, Depository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification of Bank, UNION	y by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification of Bank, Depository, etc.	y by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A

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

(h). <b>Joint Fundrais</b>	sing Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
-	ed Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
MAJORITY MAKER	RS FUND		
Mailing Address	2024 3RD AVE N		
	STE 211		
	BIRMINGHAM	AL	35203
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Representa	Leadership FAC Spr
Designated Agent: Iden	tify by name, address (phone number – optional)	int Fundraising Representa	ative Leadership PAC Spo
		Int Fundraising Representa	Leadership PAC Spo
Designated Agent: Iden		Int Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Iden		Int Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Iden Full Name Mailing Address	tify by name, address (phone number – optional)	STATE	ZIP CODE A
Designated Agent: Iden	tify by name, address (phone number – optional)		

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

(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 Representativ	e, or Leadership PAC Spons
JUSTICE VICTORY	COMMITTEE		
Mailing Address	3501 MACCORKLE AVE SE		
-	NUM 131		
	CHARLESTON	wv	25304
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identif		int Fundraising Represent	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address	Affiliated Committee X Jo  fy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee X Jo  fy by name, address (phone number – optional)  CITY		
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee X Journal of Journal of States (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite tafety deposit boxes or many and the content of the content o	Affiliated Committee X Journal of Journal of States (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposited the safety deposit boxes or make the safety deposit bo	Affiliated Committee X Jo  fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Deposite Safety deposit boxes or make the property of the Depository, etc.	Affiliated Committee X Jo fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which aintains funds.  MARSHALL BANK	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Deposite Safety deposit boxes or make the property of the Depository, etc.	Affiliated Committee X Journal of Journal of States (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in which aintains funds.  MARSHALL BANK  1625 K STREET NW	STATE A Telephone Number	ZIP CODE A

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

(h). <b>Joint Fundrais</b>	ing Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected  JONI'S ROAST AND	d Organization, Affiliated Committee, Joint Fur D RIDE	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 93441		
	DES MOINES	IA I	50393
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect		oint Fundraising Represent	ative Leadership PAC Spo
Connect	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
Connect  Designated Agent: Ident	ed Organization Affiliated Committee X Jo	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
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee X Joint Joi	sint Fundraising Represent	Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ed Organization Affiliated Committee X Joint Joi		
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit	ed Organization	STATE A Telephone Number	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or necessity.	ed Organization	STATE A Telephone Number	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite tafety deposit boxes or necessary to the content of	ed Organization	STATE A Telephone Number	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite the properties of Bank, CHAII  Name of Bank, CHAII	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or no part of Bank, Depository, etc.	Affiliated Committee X Joint Indicated Committee X Joint I	STATE A Telephone Number	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or no part of Bank, Depository, etc.	Affiliated Committee X Joint Indicated Committee X Joint I	STATE A Telephone Number	ZIP CODE A

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

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
SULLIVAN VICTOR	I Organization, Affiliated Committee, Joint Func	draising Representative	e, or Leadership PAC Spons
Mailing Address	901 N WASHINGTON ST, SUITE 700		
	ALEXANDRIA	VA	22314
		STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	ative Leadership PAC Sp
Connecte			ative Leadership PAC Spo
Connecte  Designated Agent: Identif	ed Organization Affiliated Committee X Join		ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Join		ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Join		Leadership PAC Spe
Connecte  Designated Agent: Identification  Full Name  Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional)		Leadership PAC Special PAC Spe
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee X Join fy by name, address (phone number – optional)  CITY	nt Fundraising Representa	
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or management of the content of the conte	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: Identify Full Name Mailing Address  TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or make the period of Bank, Depository, etc.	Affiliated Committee X Join fy by name, address (phone number – optional)  CITY     CITY     CITY     CITY     CITY     CITY     CITY     CITY     CITY     CITY     CITY      CITY      CITY        CITY	STATE A	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:		
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 Representativ	e, or Leadership PAC Spons
THUNE VICTORY C	OMMITTEE		
Mailing Address	PO BOX 9891		
	ARLINGTON	VA VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X J y by name, address (phone number – optional)	loint Fundraising Represent	
Designated Agent: Identi			
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi			
Designated Agent: Identi	y by name, address (phone number – optional)		
Designated Agent: Identi	y by name, address (phone number – optional)		ZIP CODE A
Pesignated Agent: Identi  Full Name   Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)		
Pesignated Agent: Identi  Full Name   _   _    Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number  ich the committee deposi	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number  ich the committee deposi	ZIP CODE A

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

1.			
		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
GRAHAM MAJORIT		 	· · · · · · · · · · · · · · · · · · ·
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA VA	22314
			ZIP CODE ▲
	CITY A  ed Organization  Affiliated Committee  X Jo  fy by name, address (phone number – optional)	STATE ▲ int Fundraising Representa	
Connected Agent: Identi	ed Organization Affiliated Committee X Jo		
Connected Connected Pesignated Agent: Identification	ed Organization Affiliated Committee X Jo		
Connected Agent: Identi	ed Organization Affiliated Committee X Jo		
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee X Jo	int Fundraising Representation	Leadership PAC Sp
Connected Agent: Identification   Full Name   Mailing Address  TITLE OR POSITION	Affiliated Committee X Jo		

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

	g Participant:				
1.			FEC II	number	С
2.			FEC II	number	C
3.			FEC II	number	C
4.			FEC II	) number	C
Name of Any Connected  HAWKEYE FUND	Organization, Affiliated	Committee, Joint	Fundraising Re <sub>l</sub>	oresentativ	e, or Leadership PAC Spons
I J J J J J J J J J J J J J J J J J J J					
Mailing Address	P.O. BOX 183				
	HUDSON		I	WI	54016
Relationship:		CITY A		STATE A	ZIP CODE ▲
Full Name					
Mailing Address					
	1				
TITLE OR POSITION	<b>▼</b>	CITY A		STATE A	ZIP CODE A
1	<b>▼</b>	1	Telephone N		ZIP CODE A
Banks or Other Depositor	ries: List all banks or of		Telephone N	umber	ZIP CODE   ZIP CODE   s funds, holds accounts, rents
Banks or Other Depositor cafety deposit boxes or ma	ries: List all banks or of	her depositories in	Telephone N	umber	
Banks or Other Depositor cafety deposit boxes or ma	ries: List all banks or of	her depositories in	Telephone N	umber	es funds, holds accounts, rents
Banks or Other Depositors afety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or of	her depositories in	Telephone N	umber	es funds, holds accounts, rents

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

	_	Participant:					
1.				FEC	ID number	С	
2				FEC	ID number	С	
3.				FEC	ID number	С	
4.				FEC	ID number	С	
				<del></del>			
lame of Any Co	onnected O	rganization, A	ffiliated Committee, Joint	Fundraising Re	epresentativ	e, or Lead	dership PAC Spo
TEAM HAGE	ERTY VICT	ΓORY					
Mailing Add	draga	P.O. BOX 504	30				
Mailing Add	aress						
		NASHVILLE			ı TN ı	3720	<u>                                     </u>
		I WILLE				0720	ZIP CODE A
Dalatianahi			0.177.4				VID COUL A
Relationshi	Connected (	Organization  oy name, addre	CITY ▲  Affiliated Committee  ess (phone number – option	≺ Joint Fundraisi	STATE ▲ ng Represent	ative	Leadership PAC
	Connected (		Affiliated Committee			ative	
esignated Age	Connected on the control of the cont		Affiliated Committee			ative	
esignated Age	Connected on the control of the cont		Affiliated Committee			ative	
esignated Age	Connected on the control of the cont		Affiliated Committee			ative	
esignated Age	nt: Identify I	by name, addre	Affiliated Committee			ative	
esignated Age Full Name Mailing Addre	nt: Identify I	by name, addre	Affiliated Committee		ng Represent	ative	Leadership PAC S

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

1.				
		FEC II	number	С
2		FEC II	number	С
3.		FEC II	number	C
4.		FEC II	number	C
CAPITO VICTORY	Organization, Affiliated Committee, Join	nt Fundraising Re	oresentative	e, or Leadership PAC Spons
	OFOO COLUTI I WAYEFIELD OTDEET			
Mailing Address	3538 SOUTH WAKEFIELD STREET			
	ARLINGTON		L VA	22206
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Full Name				
Mailing Address				
Mailing Address				
Mailing Address				
Mailing Address  TITLE OR POSITION	CITY A		STATE A	ZIP CODE A
TITLE OR POSITION	CITY A	Telephone N		ZIP CODE A
TITLE OR POSITION	ries: List all banks or other depositories i	Telephone N	umber	
TITLE OR POSITION	ries: List all banks or other depositories i intains funds.	Telephone N	umber	
TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories i intains funds.	Telephone N	umber	s funds, holds accounts, rents
TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or matching the safety deposit boxes or matching the safety deposit boxes or matching the safety depository, etc.	ries: List all banks or other depositories i intains funds.	Telephone N	umber	s funds, holds accounts, rents

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

(h). Joint Fundraisir	.g			
1.		FEC ID no	umber (	
2.		FEC ID no	umber (	
3.		FEC ID no	umber (	
4.		FEC ID no	umber (	
Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Repres	entative,	or Leadership PAC Spons
ONE TEAM SENATE	E MAJORITY			
Mailing Address	421 OFFICE PARK DRIVE		1 1 1	
-				
	MOUNTAIN BROOK	1	AL	35223
Relationship:	CITY A	S <sup>-</sup>	—— ΓATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	Joint Fundraising Re	epresentativ	ve Leadership PAC Spo
Pesignated Agent: Identif			epresentativ	ve Leadership PAC Spo
Designated Agent: Identif			epresentativ	ve Leadership PAC Spo
Pesignated Agent: Identif			epresentativ	Leadership PAC Spo
Pesignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – option	nal)		
Pesignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – option	nal)	TE A	Leadership PAC Spo
Pesignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – option	nal)	TE A	
Pesignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – option	Telephone Numb	TE A	ZIP CODE A
Pesignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – option  CITY   CITY    ories: List all banks or other depositories in a	Telephone Numb	TE A	ZIP CODE A
Pesignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor deposit boxes or make the safety deposit boxes or make the s	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in a paintains funds.	Telephone Numb	TE A  per  deposits	ZIP CODE   ZIP CODE   funds, holds accounts, rents
Pesignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Confety deposit boxes or make the proposition of Bank, Depository, etc.	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in a paintains funds.	Telephone Numb	TE A  per  deposits	ZIP CODE   ZIP CODE   funds, holds accounts, rents
Pesignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor deposit boxes or make the safety deposit boxes or make the s	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in aintains funds.	Telephone Numb	TE A  per  deposits	ZIP CODE   ZIP CODE   funds, holds accounts, rents
Pesignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Confetty deposit boxes or make the proposition of Bank, Depository, etc.	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in aintains funds.	Telephone Numb	TE A  per  deposits	ZIP CODE   ZIP CODE   funds, holds accounts, rents

Page	of <sup>66</sup>
raue	

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
Team Curtis Dinner	Committee		
Mailing Address	PO Box 30844		
	1		
	Bethesda	MD	20824
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X	oint Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee X		Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional		Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional  CITY   CITY   CITY   pries: List all banks or other depositories in wh	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 management of the control of the	fy by name, address (phone number – optional  CITY   CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional  CITY   CITY   CITY   pries: List all banks or other depositories in wh	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	fy by name, address (phone number – optional  CITY   CITY   CITY   pries: List all banks or other depositories in wh	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   CITY   pries: List all banks or other depositories in wh	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   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A

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

	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	С
4		FEC ID number	С
-	d Organization, Affiliated Committee, Joint I	Fundraising Representativ	ve, or Leadership PAC Spons
, torize i i i i i i i i i i i i i i i i i i			
Mailing Address	PO BOX 811		
	MARION		52302
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Designated Agent: Ident	ify by name, address (phone number - option	al)	
Pesignated Agent: Ident	ify by name, address (phone number – option	al)	
	ify by name, address (phone number – option	al)	
Full Name	ify by name, address (phone number – option	al)	
Full Name	ify by name, address (phone number – options	al)	
Full Name	CITY	al)  STATE	ZIP CODE A
Full Name Mailing Address	CITY		ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	CITY A	STATE A Telephone Number	
Full Name Mailing Address  TITLE OR POSITION	CITY ▲  cries: List all banks or other depositories in w	STATE A Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or n	CITY ▲  cries: List all banks or other depositories in w	STATE A Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit	CITY ▲  CITY ▲  Ories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or null ame of Bank,	CITY ▲  CITY ▲  Ories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	its funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or not be boxed by the second state of Bank, Depository, etc.	CITY ▲  city A  cories: List all banks or other depositories in what is a substitution of the control of the c	STATE A  Telephone Number	its funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or not be boxed by the second state of Bank, Depository, etc.	CITY ▲  city A  cories: List all banks or other depositories in what is a substitution of the control of the c	STATE A  Telephone Number	its funds, holds accounts, rents

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

1.			FEC ID nu	mber	C
2			FEC ID nu	mber	C
3.			FEC ID nu	mber	С
4.			   FEC ID nu	mber	С
lame of Any Con	nected Organization	, Affiliated Committee, Joint	Fundraising Repres	entative,	, or Leadership PAC Spor
JOSH HAWLE	Y VICTORY COMI	MITTEE 			
Mailing Addre	P.O. BOX	31476			
Mailing Addres					
	SAINT LO	UIS		MO ı	, 63131
				ATE A	
Polationship				AIL 🔺	ZIP CODE ▲
	onnected Organization	CITY A  Affiliated Committee	Joint Fundraising Re		tive Leadership PAC S
Co		Affiliated Committee	Joint Fundraising Re		tive Leadership PAC S
esignated Agent:	Identify by name, ad	Affiliated Committee	Joint Fundraising Re		tive Leadership PAC S
esignated Agent:	Identify by name, ad	Affiliated Committee	Joint Fundraising Re		tive Leadership PAC S
esignated Agent:	Identify by name, ad	Affiliated Committee	Joint Fundraising Re		tive Leadership PAC S
esignated Agent:	Identify by name, ad	Affiliated Committee	Joint Fundraising Re		Leadership PAC S
Pesignated Agent:  Full Name  Mailing Address	Identify by name, ad	Affiliated Committee	Joint Fundraising Re	presentat	

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

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
-	OCAMANTEE	undraising Representativ	re, or Leadership PAC Spons
COTTON MAJORIT			
Mailing Address	901 N WASHINGTON ST		
Ü	STE 700		
	ALEXANDRIA	VA I	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ed Organization Affiliated Committee X	Joint Fundraising Represent	tative Leadership PAC Spo
Connection	fy by name, address (phone number – optiona		
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi  Full Name    Mailing Address	fy by name, address (phone number – optional	al)	
Pesignated Agent: Identi  Full Name   Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional distribution).  CITY	STATE A	ZIP CODE A
Pesignated Agent: Identi  Full Name   Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional	al)	
Pesignated Agent: Identi Full Name Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional state of the control	STATE  Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name   Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional state of the control	STATE  Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional content of the conten	STATE  Telephone Number	ZIP CODE A  ts funds, holds accounts, rents
Pesignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Agents or Other Deposite tafety deposit boxes or maken and maken agents.	fy by name, address (phone number – optional content of the conten	STATE  Telephone Number  which the committee deposit	ZIP CODE A  ts funds, holds accounts, rents
Pesignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	fy by name, address (phone number – optional content of the prices of th	STATE   Telephone Number  which the committee deposit	ZIP CODE A  ts funds, holds accounts, rents
Pesignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	fy by name, address (phone number – optional content of the conten	STATE   Telephone Number  which the committee deposit	ZIP CODE A  ts funds, holds accounts, rents

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

cited Committee,  CITY    City   City   City   City   City   City   City   City   City    City   City   City   City   City   City   City   City   City    City   City   City   City   City   City   City   City   City    City   City   City   City   City   City   City   City   City	ee X Joir	FEC ID	NC STATE A	27	524 ZIP (	PAC Spons  CODE A  hip PAC Spo
CITY ▲	ee X Joir	FEC ID	o number  oresentativ	C C re, or Lea	524 ZIP (	DODE A
CITY ▲	ee X Joir	FEC ID	oresentativ	re, or Lea	524 ZIP (	DODE A
CITY ▲	ee X Joir	draising Rep	oresentativ	ze, or Lea	524 ZIP (	DODE A
CITY ▲	ee X Joir		NC STATE A	27	524 ZIP (	DODE A
CITY ▲	ee X Joir		NC STATE A	27	524 ZIP (	DODE A
Affiliated Committe		nt Fundraising	STATE A		ZIP (	
Affiliated Committe		nt Fundraising	STATE A		ZIP (	
Affiliated Committe		nt Fundraising	STATE A		ZIP (	
Affiliated Committe		nt Fundraising	STATE A		ZIP (	
Affiliated Committe		nt Fundraising	STATE A		ZIP (	
Affiliated Committe		nt Fundraising	STATE A		ZIP (	
Affiliated Committe		nt Fundraising		tative	-	
		nt Fundraising	g Represen	tative	Leaders	hip PAC Spo
						1 1
CITY A			STATE A		ZIP CC	DDF A
	1 -			ı	1	
		lelephone Ni	umber _			] - [
_		other depositories in which	Telephone N	Telephone Number	Telephone Number	

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r(h). <b>Joint Fundraisin</b> o	Participant:			
1.		FEC	ID number	C
2		FEC	ID number	C
3.		FEC	ID number	C
4.		FEC	ID number	С
Name of Any Connected	Organization, Affiliated Committee,	Joint Fundraising F	Representative	e, or Leadership PAC Sponsor
TIM SCOTT VICTORY	/ FUND			
Mailing Address	1405 ASHLEY RIVER RD			
	CHARLESTON	<b>.</b>	SC	29407
Relationship:	CITY A		STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee	e X Joint Fundrais	ina Banrasante	ative Leadership PAC Spons
Full Name				
Mailing Address				
TITLE OR POSITION	▼ CITY ▲		STATE ▲	ZIP CODE ▲
TITLE OR POSITION	CITY A	Telephone		ZIP CODE ▲

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

5(g) or (h)	). Joint Fundraisin	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6. <b>Na</b>	me of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
_	CRAPO VICTORY CO			
L				
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization	t Fundraising Represent	ative Leadership PAC Sponsor
8. <b>De</b> s	signated Agent: Identify  Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			elephone Number	
safe Nar	ety deposit boxes or ma	<b>ries:</b> List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
Dep	me of Bank, pository, etc.			
Dep	pository, etc.	<u></u>		<u> </u>
Dep				

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(h). <b>Joint Fundraisin</b>	g Participant:		
1		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	, or Leadership PAC Sponsor
NRSC/NRCC VICTO	RY COMMITTEE		
Mailing Address	228 S WASHINGTON STREET #115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization	Fundraising Representa	tive Leadership PAC Sponso
Designated Agent: Identify	y by name, address (phone number - optional)		
Designated Agent: Identify Full Name	y by name, address (phone number – optional)	1 1 1 1 1 1 1	
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito	CITY   CITY   Te	lephone Number	
Full Name Mailing Address  TITLE OR POSITION	CITY   CITY   Te	lephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito	CITY   CITY   Te  ries: List all banks or other depositories in which taintains funds.	lephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main and the safety deposit	CITY   CITY   Te  ries: List all banks or other depositories in which taintains funds.	lephone Number	s funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY   CITY   Te  ries: List all banks or other depositories in which taintains funds.	lephone Number	s funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY   CITY   Te  ries: List all banks or other depositories in which taintains funds.	lephone Number	s funds, holds accounts, rents

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		FEC ID number	С
	<u> </u>	FEC ID number	С
	<u> </u>	FEC ID number	С
		FEC ID number	С
_	iated Committee, Joint F	undraising Representati	ve, or Leadership PAC Spons
RY COMMITTEE			
228 S WASHING	TON STREET SUITE 115		
ALEXANDRIA		VA I	22314
	CITY A	STATE A	ZIP CODE 🛦
TION ▼	CITY A	STATE ▲	ZIP CODE ▲
	228 S WASHING ALEXANDRIA Annected Organization  dentify by name, address	DRY COMMITTEE  228 S WASHINGTON STREET SUITE 115  ALEXANDRIA  Innected Organization Affiliated Committee X  CITY A  CITY A	FEC ID number  Pected Organization, Affiliated Committee, Joint Fundraising Representation  PRY COMMITTEE  228 S WASHINGTON STREET SUITE 115  ALEXANDRIA  CITY A  STATE A  CITY A  STATE A  STATE A

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

(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
Name of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
MIKE LEE VICTORY	/ FUND	1 1 1 1 1 1 1 1	
Mailing Address	PO BOX 183		
	HUDSON	wi	54016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte		int Fundraising Represent	Leadership PAC Spo
Connecte  Designated Agent: Identi	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address	Affiliated Committee X Jo  fy by name, address (phone number – optional)  CITY		
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee X Jo  fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Designated deposit boxes or make the proposition of Bank, Depository, etc.	Affiliated Committee X Jo  fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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Page	of oo

(h). <b>Joint Fundraisin</b> o	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representative	e, or Leadership PAC Sponsor
MONDAY MEETING I	PAC		
1			
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
0	Organization Affiliated Committee X	Joint Fundraising Representa	ative Leadership PAC Spons
Full Name			
Full Name			
Mailing Address	CITY A	STATE A	ZIP CODE A
	CITY A	STATE A  Telephone Number	ZIP CODE <b>A</b>

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

1.			
		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
GRAHAM MAJORIT		 	· · · · · · · · · · · · · · · · · · ·
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA VA	22314
			ZIP CODE ▲
	CITY A  ed Organization  Affiliated Committee  X Jo  fy by name, address (phone number – optional)	STATE ▲ int Fundraising Representa	
Connected Agent: Identi	ed Organization Affiliated Committee X Jo		
Connected Connected Pesignated Agent: Identification	ed Organization Affiliated Committee X Jo		
Connected Agent: Identi	ed Organization Affiliated Committee X Jo		
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee X Jo	int Fundraising Representation	Leadership PAC Sp
Connected Agent: Identification   Full Name   Mailing Address  TITLE OR POSITION	Affiliated Committee X Jo		

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

	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connecte	d Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spons
TEAM RAND			
Mailing Address	PO BOX 190		
ag , taaeee			
	, NEWPORT	ı KYı	, 41072
Relationship:	CITY ▲	STATE A	ZIP CODE A
		Joint Fundraising Represent	
esignated Agent: Ident	ify by name, address (phone number – optiona		
esignated Agent: Ident			
esignated Agent: Ident			
esignated Agent: Ident			
esignated Agent: Ident	tify by name, address (phone number – optional	Al)	
esignated Agent: Ident	city by name, address (phone number – optional		ZIP CODE A
esignated Agent: Ident Full Name  Mailing Address  TITLE OR POSITIO	city by name, address (phone number – optional	Al)	
esignated Agent: Ident Full Name  Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional nu	STATE A	
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional states).  CITY   CITY   tories: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name  Mailing Address  TITLE OR POSITIO  anks or Other Depositatety deposit boxes or research.	ify by name, address (phone number – optional states).  CITY   CITY   tories: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO	cify by name, address (phone number – optional content of the cont	STATE A  Telephone Number  hich the committee deposi	ZIP CODE A
esignated Agent: Identification of Bank, programme of Bank,	cify by name, address (phone number – optional content of the cont	STATE   Telephone Number  hich the committee deposi	ZIP CODE A  ts funds, holds accounts, rent
esignated Agent: Identification of Position of Bank, epository, etc.	cify by name, address (phone number – optional n	STATE   Telephone Number  hich the committee deposi	ZIP CODE A  ts funds, holds accounts, rent
esignated Agent: Identification of Position of Bank, epository, etc.	cify by name, address (phone number – optional n	STATE   Telephone Number  hich the committee deposi	ZIP CODE A  ts funds, holds accounts, rent

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

	g Participant:			
1.			FEC ID numbe	r C
2.			FEC ID numbe	r C
3.			FEC ID numbe	r C
4.			FEC ID numbe	r C
Name of Any Connected	Organization, Affiliate	ed Committee, Joint F	undraising Representa	tive, or Leadership PAC Sponso
TEAM JONI				
Mailing Address	PO BOX 93441			
J				
	DES MOINES		ı ı IA	1 50393
Relationship:		OITY A		
Helationship.		CITY A	STATE	▲ ZIP CODE ▲
Full Name				
Full Name Mailing Address				
Mailing Address		CITY	STATE A	ZIP CODE A
		CITY A	STATE A	ZIP CODE A

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

228 S. WA STE. 115 ALEXAND ected Organization	JND  SHINGTON ST.	oint Fundraisir	FEC ID number FEC ID number FEC ID number FEC ID number  THE THE TEC ID Number  THE THE THE TEC ID Number  THE THE THE TEC ID NUMBER  THE	C C C C C C C C Z Z Z Z Z Z Z Z Z Z Z Z
228 S. WA STE. 115 ALEXAND ected Organization	SHINGTON ST.  ORIA  CITY   Affiliated Committee	oint Fundraisir	FEC ID number  FEC ID number  IN THE STATE A	re, or Leadership PAC Spon
228 S. WA STE. 115 ALEXAND ected Organization	SHINGTON ST.  ORIA  CITY   Affiliated Committee	oint Fundraisir	Representativ	re, or Leadership PAC Spon
228 S. WA STE. 115 ALEXAND ected Organization	SHINGTON ST.  ORIA  CITY   Affiliated Committee	oint Fundraisir	ng Representativ	ze, or Leadership PAC Spon
228 S. WA STE. 115 ALEXAND ected Organization	SHINGTON ST.  ORIA  CITY   Affiliated Committee	X Joint Fund	VA STATE A	22314 ZIP CODE <b>A</b>
228 S. WA STE. 115 ALEXAND ected Organization	SHINGTON ST.  ORIA  CITY   Affiliated Committee	X Joint Fund	VA STATE A	22314 ZIP CODE <b>A</b>
STE. 115 ALEXAND	CITY  Affiliated Committee	_	STATE A	ZIP CODE ▲
STE. 115 ALEXAND	CITY  Affiliated Committee	_	STATE A	ZIP CODE ▲
ALEXAND  ALEXAND	CITY ▲  Affiliated Committee	_	STATE A	ZIP CODE ▲
ected Organization	CITY ▲  Affiliated Committee	_	STATE A	ZIP CODE ▲
	Affiliated Committee	_		
		_	draising Represent	tative Leadership PAC S
	CITY A		STATE A	ZIP CODE ▲
TION ▼	0111 =			211 0002 2
		Teleph	one Number	
0	ositories: List all t	nositories: List all banks or other depositorie or maintains funds.	Telephositories: List all banks or other depositories in which the or maintains funds.	Telephone Number  Dositories: List all banks or other depositories in which the committee depositor maintains funds.

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

(h). Joint Fundraisir	ig Faiticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON STREET SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X	oint Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee X		ative Leadership PAC Spo
Connecte			ative Leadership PAC Spo
Connecte  Designated Agent: Identif			ative Leadership PAC Spo
Connecte  Designated Agent: Identif			ative Leadership PAC Spo
Connecte  Designated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional		ative Leadership PAC Spo
Connecte  Designated Agent: Identif	y by name, address (phone number – optional		
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional  CITY   CITY   ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the composition of Bank, Depository, etc.	y by name, address (phone number – optional  CITY   CITY   ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A

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

1.						
				FEC II	number	C
2. 🔲				FEC II	number	С
3.				FEC II	number	C
4.	1 1 1 1 1 1			   FEC II	) number	С
	KBURN VICTOR		ated Committee, Joint	Fundraising Rep	oresentative	e, or Leadership PAC Spons
Mail	iling Address	PO BOX 3241				
		BRENTWOOD			TN	37024
Rela	ationship:		CITY A		STATE A	ZIP CODE ▲
		-	(phone number – option	iai)		
Full N	lame		(priorie name). epilo			
	lame					
Mailin			CITY A		STATE A	ZIP CODE A

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(h). <b>Joint Fundraisi</b>	ng rantopanti		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Inner of Ame Comments	Committee Affiliated Committee Laint F	- dusisia a Baumanahati	an I and auchin DAO Conne
CORNYN VICTORY	Organization, Affiliated Committee, Joint For COMMITTEE	indraising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 13026		
	AUSTIN	NC NC	78711
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
	Affiliated Committee X  fy by name, address (phone number – optional	Joint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optiona		
esignated Agent: Identi	fy by name, address (phone number – optiona		Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optiona		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional CITY A CITY A cries: List all banks or other depositories in whaintains funds.	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 management of Bank,	fy by name, address (phone number – optional CITY A CITY A cries: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	ZIP CODE A  ts funds, holds accounts, rent
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or manage of Bank, repository, etc.	fy by name, address (phone number – optional CITY A  CITY A  pries: List all banks or other depositories in whaintains funds.	STATE  Telephone Number  inich the committee deposi	ZIP CODE A  ts funds, holds accounts, rent

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

	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	ndraising Representative	e, or Leadership PAC Spons
BANKS VICTORY F	UND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name   _   _   Mailing Address	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or management of Bank,	CITY ▲  CITY ▲  pries: List all banks or other depositories in whice aintains funds.	Telephone Number	
Full Name   _   _	CITY A  CITY A  pries: List all banks or other depositories in whice aintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A  CITY A  pries: List all banks or other depositories in whice aintains funds.	Telephone Number	s funds, holds accounts, rents

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or (h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
MULLIN VICTORY F	UND		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA I	22314
Relationship:	CITY ▲	STATE A	ZIP CODE A
Connector	d Organization	t Fundraising Representa	Leadership PAC Sponso
Full Name	y by name, address (phone number – optional)		
Mailing Address			
-			
		1 1 1	
	CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	•	1	1 1 1 1
		elephone Number	
Banks or Other Deposito safety deposit boxes or ma	<b>ries:</b> List all banks or other depositories in which aintains funds.	the committee deposit	s funds, holds accounts, rents
Depository, etc.			
Mailing Address			
	1		

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

(h). <b>Joint Fundraisi</b>	ng Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
SHEEHY VICTORY	COMMITTEE		
Mailing Address	228 S WASHINGTON ST		
	STE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name			ative Leadership PAC Spo
Connecte  Designated Agent: Identi			ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name			ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)	STATE A	
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)		
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite tafety deposit boxes or make the safety deposit boxes o	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Sanks or Other Depositional Part of Bank, Depository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in what intains funds.	STATE A  Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite tafety deposit boxes or make the safety deposit boxes o	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in what intains funds.	STATE A  Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Sanks or Other Depositional Part of Bank, Depository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in what intains funds.	STATE A  Telephone Number	ZIP CODE A

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

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
ame of Any Connected , HYDE-SMITH VICTO	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 2930		
	JACKSON	MS	39207
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Representa	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
Connecte	d Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee X Jo	int Fundraising Representation	Leadership PAC Sp
Connecte esignated Agent: Identif	Affiliated Committee X Jo  Ty by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee X Jo  Ty by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Connected esignated Agent: Identification of the position of t	Affiliated Committee X Jo  Ty by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in which aintains funds.	STATE A  Telephone Number	ZIP CODE A

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

	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
		•	
-	OR MANUE	ndraising Representativ	e, or Leadership PAC Spons
SUSAN COLLINS F	OR MAINE 		
Mailing Address	PO BOX 72100		<u> </u>
	NEWPORT	KY KY	41072
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	
			Leadership PAC Sp
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi	fy by name, address (phone number – optional)		ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name     Mailing Address   TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white inintains 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,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white inintains 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white inintains 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white inintains funds.	STATE A  Telephone Number	ZIP CODE A

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

	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  SECURE THE US S	d Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
SECORE THE 03 C			
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X J	oint Fundraising Represent	Zave E Zeadoromp 1740 Opc
			Lance Leadership Fixe ope
Designated Agent: Ident			Lawe Law Education Price Ope
Pesignated Agent: Ident			
Pesignated Agent: Ident			
Pesignated Agent: Ident	ify by name, address (phone number – optional)		ZIP CODE A
Pesignated Agent: Ident  Full Name	ify by name, address (phone number – optional)		
Pesignated Agent: Ident  Full Name	ify by name, address (phone number – optional)	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident  Full Name	ify by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Banks or Other Deposit	ify by name, address (phone number – optional)  CITY ▲  Ories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Anks or Other Deposite afety deposit boxes or not be bank,	ify by name, address (phone number – optional)  CITY ▲  Ories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name	cories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number  ich the committee deposit	ZIP CODE A s funds, holds accounts, rents
Pesignated Agent: Ident Full Name	cories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number  ich the committee deposit	ZIP CODE A s funds, holds accounts, rents

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

	sing Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connecte	ed Organization, Affiliated Committee, Joint	Fundraising Representat	ive, or Leadership PAC Sponso
TILLIS AND COLLE	EAGUES VICTORY COMMITTEE		
	220 C WASHINGTON STREET SHITE 445		
Mailing Address	228 S WASHINGTON STREET SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY A	STATE A	▲ ZIP CODE ▲
	tify by name, address (phone number - option	,	
Full Name			
Full Name			
Mailing Address	CITY	STATE A	ZIP CODE A
Mailing Address  TITLE OR POSITIO	ON V	STATE A Telephone Number	ZIP CODE <b>A</b>

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

1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connector WINNING FOR AM	ed Organization, Affiliated Committee, Joint Fun ERICA FUND	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	101 W ARGONNE DR		
	<b>#24</b>		
	SAINT LOUIS		63122
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	tify by name, address (phone number – optional)	oint Fundraising Represent	
esignated Agent: Ider			
Pesignated Agent: Ider			
esignated Agent: Ider			Leadership PAC Sp
esignated Agent: Ider	tify by name, address (phone number – optional)		ZIP CODE A

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r(h). <b>Joint Fundraisin</b>	g Participant:			
1		FEC ID	number	C
2		FEC ID	number	C
3.		FEC ID	number	C
4.		FEC ID	number	C
Name of Any Connected	Organization, Affiliated Committee, Jo	oint Fundraising Repr	esentative,	or Leadership PAC Sponso
TEAM MCCORMICK				
Mailing Address	PO BOX 23537			
Mailing Address				
	PITTSBURGH		PA	15222
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
Designated Agent: Identify	v by name, address (phone number – o	ptional)		
Full Name				
Full Name				
Full Name				
Mailing Address	CITY	S	TATE A	ZIP CODE A
	CITY A	S' Telephone Nur		ZIP CODE A

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h). <b>Joint Fundraisi</b>	•		
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 Fu	ndraising Representativ	e, or Leadership PAC Spons
COLLINS VICTORY	COMMITTEE		
Mailing Address	901 N WASHINGTON ST, STE 700		
Mailing Address			
	ALEXANDRIA	ı VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE A
Tiolationomp.	0111 2	SIAIL	ZII GODE A
	Affiliated Committee X J  fy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optiona	_	
Full Name Mailing Address  TITLE OR POSITION  nks or Other Deposite ety deposit boxes or me	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in wh	STAT Telephone Number	re 🛦
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	city by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	city by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	city by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	city by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	ZIP CODE A

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Page	OT		

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
ame of Any Connected , HOGAN VICTORY I	d Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
HOGAN VICTORT			
Mailing Address	2077 SOMERVILLE ROAD		
	SUITE 206		1 1 1 1 1 1 1 1 1
	ANNAPOLIS	, , , MD ,	21401
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
		oint Fundraising Hepresent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Hepresent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Hepresent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Hepresent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE	ZIP CODE A
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identification Full Name     Mailing Address   TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which anintains 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which anintains funds.	STATE A  Telephone Number	ZIP CODE A

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h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representativ	ve, or Leadership PAC Spons
PA VICTORY			
Mailing Address	421 OFFICE PARK DRIVE		
	MOUNTAIN BROOK	, , , , , AL ,	35223
Relationship:	CITY ▲	STATE <b>A</b>	ZIP CODE ▲
Connected	CITY A	Joint Fundraising Represen	
esignated Agent: Identify  Full Name	CITY ▲  I Organization Affiliated Committee X	Joint Fundraising Represen	
Connected esignated Agent: Identify	CITY ▲  I Organization Affiliated Committee X	Joint Fundraising Represen	
esignated Agent: Identify  Full Name	CITY ▲  I Organization Affiliated Committee X	Joint Fundraising Represen	
esignated Agent: Identify  Full Name  Mailing Address	CITY A  Affiliated Committee   by name, address (phone number – optional   CITY A	Joint Fundraising Represen	
esignated Agent: Identify  Full Name	CITY A  Affiliated Committee   by name, address (phone number – optional   CITY A	Joint Fundraising Represen	Leadership PAC Sp

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

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connecte	d Organization, Affiliated Committee, Joint Fo	undraising Representativ	e, or Leadership PAC Spon
CAO VICTORY FUI	ND 2024		
Mailing Address	PO BOX 30844		
	BETHESDA	ı ı MD ı	20824
Relationship:	CITY ▲	STATE A	ZIP CODE A
	Affiliated Committee X  ify by name, address (phone number – optiona	Joint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident			Leadership PAC Sp
esignated Agent: Ident			Ative Leadership PAC Sp
esignated Agent: Ident			Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optiona	i)	
esignated Agent: Ident	ify by name, address (phone number – optiona		Leadership PAC Sp
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optiona	i)	
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optiona	STATE A	
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional content of the conte	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION TITLE OR P	ify by name, address (phone number – optional content of the conte	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITIO	cify by name, address (phone number – optional depositories in what in a funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	cify by name, address (phone number – optional depositories in what in a funds.	STATE  Telephone Number  inich the committee deposit	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc	CITY A  cories: List all banks or other depositories in what in a sintains funds.	STATE  Telephone Number  inich the committee deposit	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc	CITY A  cories: List all banks or other depositories in what in a sintains funds.	STATE  Telephone Number  inich the committee deposit	ZIP CODE A

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ation, Affiliated Committee, Joint	FEC ID number	C C C
	FEC ID number	С
	FEC ID number	
		C
	Fundraising Representati	
		e, or Leadership PAC Sponso
=		
3OX 13026		
 TIN	, TX ,	78711
CITY A	STATE A	ZIP CODE ▲
ie, address (priorie ridinber – optiori	ai)	
CITY ▲	STATE ▲	ZIP CODE ▲
	Telephone Number	
	TIN  CITY   ation Affiliated Committee   Affiliated Committee   i.e., address (phone number – options)	TIN  CITY   STATE   ation Affiliated Committee   Joint Fundraising Represent  TX  STATE   Affiliated Committee   STATE    STATE   STATE   STATE   STATE    STATE    STATE    STATE    STATE   STATE     STA

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

h). <b>Joint Fundrais</b> i	ng rarticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
NELLA VICTORY F	_		
Mailing Address	P.O. BOX 90574		
	ALBUQUERQUE	NM NM	87199
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Ident	ed Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
esignated Agent: Ident  Full Name  Mailing Address	fy by name, address (phone number – optional		ative Leadership PAC Sp
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional CITY A  CITY A  ories: List all banks or other depositories in what intains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional CITY A  CITY A  ories: List all banks or other depositories in what intains funds.	STATE A  Telephone Number  ich the committee deposit	ZIP CODE   ZIP CODE   ts funds, holds accounts, rent

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h). <b>Joint Fundraisi</b>	ig raiticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connector	Organization, Affiliated Committee, Joint Fu	ndraising Ronrosontativ	e or Leadershin BAC Spon
NRSC VICTORY		Huraising Representativ	e, or Leadership TAO Spon
Mailing Address	228 S WASHINGTON ST		
	STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional		
esignated Agent: Identi	fy by name, address (phone number – optional		Ative Leadership PAC Sp
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional CITY A  CITY A  pries: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number  ich the committee deposit	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,	city by name, address (phone number – optional states of the control of the contr	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.	fy by name, address (phone number – optional CITY A  CITY A  pries: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number  ich the committee deposit	ZIP CODE A

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h). <b>Joint Fundraisi</b>	ig i ai dolpanti		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lama of Any Connected	Organization, Affiliated Committee, Joint F	undraining Panyacantativ	o or Londovskip DAC Spop
TEAM MORENO		Liliani Representativ	e, or Leadership FAC Spons
Mailing Address	P.O. BOX 340797		
	COLUMBUS	OH	43234
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X  y by name, address (phone number – optional	Joint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optiona	i)	
esignated Agent: Identif	y by name, address (phone number – optiona		ative Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	y by name, address (phone number – optiona	i)	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional content of the content	STATE   Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional content of the content	STATE  Telephone Number  nich the committee deposi	ZIP CODE A  ts funds, holds accounts, rent
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 content of the content	STATE  Telephone Number  inich the committee deposi	ZIP CODE A  ts funds, holds accounts, rent

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

			FEC I	D number D number	C
				D number	
			ı FEC I		O
				D number	С
			FEC I	D number	С
Connected O	rganization, Aff	iliated Committee, Joint	Fundraising Re	presentative	e, or Leadership PAC Spor
E VICTORY	FUND				
	. DO BOY 34341				
address	PO BOX 34341				
	PHOENIX			AZ	85067
ship:		CITY ▲		STATE ▲	ZIP CODE ▲
dress	I				
					1 , , , , 1-1 ,
POSITION		CITY A		STATE A	ZIP CODE A
POSITION		CITY A	Telephone N		ZIP CODE A
	ddress  hip: Connected of the connected	PHOENIX hip:  Connected Organization  Pent: Identify by name, addres	PHOENIX  hip:  Connected Organization  Affiliated Committee  Pent: Identify by name, address (phone number – option	PHOENIX  PHOENIX  Connected Organization  Affiliated Committee  Joint Fundraisin  Pent: Identify by name, address (phone number – optional)	PHOENIX  hip:  CITY   STATE   Connected Organization  Affiliated Committee  X Joint Fundraising Representation in the committee of the committ

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

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
-	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		1 1 1 1 1 1 1 1 1 1
Relationship:	BETHESDA ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	MD MD STATE ▲	20824 ZIP CODE ▲
п.	Afficient Committee	nt Fundraising Representa	ative Leadership PAC Spo
Designated Agent: Ident	Affiliated Committee X Join fy by name, address (phone number – optional)	it rundraising riepiesenia	Zave Zeadoromp 1740 Opt
Designated Agent: Ident			
Designated Agent: Ident		Trundraising Hepresenta	
Designated Agent: Ident	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Ident  Full Name    Mailing Address	fy by name, address (phone number – optional)  CITY		
Pesignated Agent: Ident  Full Name	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
Pesignated Agent: Identification of Bank, Depository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which naintains funds.	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	re, or Leadership PAC Spons
RECLAIM THE MAJ	ORITY		
	421 OFFICE PARK DR		
Mailing Address			
	MOUNTAIN BROOK	AL	35223
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X J	oint Fundraising Represent	tative Leadership PAC Spo
Connecte			tative Leadership PAC Spo
Connecte  Designated Agent: Identif	ed Organization Affiliated Committee X J		tative Leadership PAC Spo
Connecte  Designated Agent: Identif	ed Organization Affiliated Committee X J		Leadership PAC Spo
Connecte  Designated Agent: Identif	ed Organization Affiliated Committee X J		Leadership PAC Spo
Connecte  Designated Agent: Identification  Full Name  Mailing Address	Affiliated Committee X J		Leadership PAC Spo
Connecte  Designated Agent: Identif	Affiliated Committee X J	STATE A	
Connecte  Designated Agent: Identification  Full Name  Mailing Address	Affiliated Committee X J		
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor	Affiliated Committee X J  fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee X J  fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor	Affiliated Committee X J  fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposited safety deposit boxes or make the content of Bank,	Affiliated Committee X J  fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee X J  fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee X J  fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A

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

	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Jame of Any Connected	I Organization, Affiliated Committee, Joint Fur	ndraising Benresentative	or Leadership PAC Spons
-	AGUES VICTORY COMMITTEE		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number - optional)		
Pesignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE  Telephone Number	ZIP CODE A
Full Name   _   _   Mailing Address	CITY ▲  cries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the second process of the second	CITY ▲  cries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rents

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

FEC ID number C  2.	h). <b>Joint Fundraisi</b>	g		
3.	1.		FEC ID number	С
Austin Relationship: City A State A Zip code Augustion and Affiliated Committee State Agent: Identify by name, address (phone number – optional)  FEC ID number C  Relationship: City A State A Zip code Augustion and Affiliated Committee State Agent: Identify by name, address (phone number – optional)  Full Name Mailing Address  City A State A Zip code A Zip cod	2.		FEC ID number	C
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spon CORNYN VICTORY COMMITTEE  Mailing Address  PO BOX 13026  AUSTIN  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Spon  Leadership PAC Spon  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Spon  CITY ▲  STATE ▲  ZIP CODE ▲  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲	3.		FEC ID number	С
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spon CORNYN VICTORY COMMITTEE  Mailing Address  PO BOX 13026  AUSTIN  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Spon  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Spon  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Spon  CITY ▲  STATE ▲  ZIP CODE ▲  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲	4.		FEC ID number	С
CORNYN VICTORY COMMITTEE  Mailing Address  PO BOX 13026  AUSTIN  AUSTIN  TX  78711  TX  78711  TX  TX  TATI  TX  TX  TATI  TX  TATI  TX  TX  TX  TX  TX  TX  TX  TX  TX				
Mailing Address  PO BOX 13026  AUSTIN  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Spesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY ▲  STATE ▲  ZIP CODE ▲  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲	-		ndraising Representative	e, or Leadership PAC Spons
AUSTIN  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Since the sesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  ZIP CODE ▲	CORNYN VICTORY	COMMITTEE		
AUSTIN  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Since the sesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  ZIP CODE ▲				
Relationship:  CITY A  STATE A  ZIP CODE A  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Spesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY A  STATE A  ZIP CODE A  ZIP CODE A  TITLE OR POSITION   STATE A  ZIP CODE A	Mailing Address	PO BOX 13026		1 1 1 1 1 1 1 1 1
Relationship:  CITY A  STATE A  ZIP CODE A  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Spesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY A  STATE A  ZIP CODE A  ZIP CODE A  TITLE OR POSITION   STATE A  ZIP CODE A				
Connected Organization  Affiliated Committee		AUSTIN	TX	78711
esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY   STATE   ZIP CODE   ZIP CODE	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲				ative Leadership PAC Sp
TITLE OR POSITION ▼	esignated Agent: Identi			ative Leadership PAC Sp
TITLE OR POSITION ▼	esignated Agent: Identi			Leadership PAC Sp
TITLE OR POSITION ▼	esignated Agent: Identi			Leadership PAC Sp
	esignated Agent: Identi			Leadership PAC Sp
	esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
	esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
	esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
ame of Bank	esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mail	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
	esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in white anintains funds.	STATE A  Telephone Number	ZIP CODE A
	esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in white anintains funds.	STATE A  Telephone Number	ZIP CODE A
epository, etc.	esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in white anintains funds.	STATE A  Telephone Number	ZIP CODE A
epository, etc.	esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in white anintains funds.	STATE A  Telephone Number	ZIP CODE A

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(h). <b>Joint Fundraisi</b>	<b>3</b> · · · · <b>p</b> · ·		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint F	undraising Banrasantativ	e or Leadershin BAC Spon
RON JOHNSON VIC		The state of the s	
Mailing Address	P.O. BOX 1159		
	OSHKOSH	WI	54903
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Affiliated Committee X  by by name, address (phone number – optional	Joint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi	y by name, address (phone number – optiona		
esignated Agent: Identi	by by name, address (phone number – optional		ative Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	by by name, address (phone number – optional		
esignated Agent: Identi  Full Name	CITY A  CITY A  pries: List all banks or other depositories in whaintains funds.	STATE   Telephone Number  inich the committee deposi	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make afety deposit boxes or make afety deposit boxes.	CITY A  CITY A  pries: List all banks or other depositories in whaintains funds.	STATE   Telephone Number  inich the committee deposi	ZIP CODE A  ts funds, holds accounts, rent
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	city by name, address (phone number – optional content of the cont	STATE  Telephone Number  inich the committee deposit	ZIP CODE A  ts funds, holds accounts, rent

Page	of <sup>66</sup>	
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h). <b>Joint Fundraisi</b>	ig i di dolpanti		
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 F	undraising Representati	ve, or Leadership PAC Spon
LA VICTORY			
Mailing Address	PO BOX 80505		
	BATON ROUGE	LA	70898
Relationship:	CITY ▲	STATE	■ ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Joint Fundraising Represen	ntative Leadership PAC Sp
	d Organization Affiliated Committee X  y by name, address (phone number – optional		tative Leadership PAC Sp
			tative Leadersnip PAC Sp
esignated Agent: Identi			Leadersnip PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identing Full Name  Mailing Address	y by name, address (phone number – optiona		ZIP CODE A
esignated Agent: Identi	y by name, address (phone number – optiona	al)	
esignated Agent: Identing Full Name  Mailing Address	y by name, address (phone number – optiona	STATE A	
esignated Agent: Identii  Full Name	y by name, address (phone number – optional state of the control	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 marked and the state of the s	y by name, address (phone number – optional state of the control	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited afety deposit boxes or management and manageme	y by name, address (phone number – optional state of the control	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 state of the control	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 state of the control	STATE A Telephone Number	ZIP CODE A

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g) or (h). <b>Joint Fundraisi</b> n	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Sponsor
AMERICA IS BACK			
Mailing Address	425 2ND ST NE		
	WASHINGTON	DC	20002
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connected	d Organization	oint Fundraising Represent	ative Leadership PAC Sponso
Designated Agent: Identify  Full Name	y by name, address (phone number – optional)		
Mailing Address			
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in whaintains funds.	ch the committee deposit	s funds, holds accounts, rents
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

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(h). <b>Joint Fundraisi</b>	ng Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
SENATE MAJORIT	I Organization, Affiliated Committee, Joint Fun ACTION FUND	draising Representative	e, or Leadership PAC Spons
Mailing Address	425 2ND ST NE		
	WASHINGTON	DC DC	20002
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecto		nt Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Joint Joi	nt Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Joint Joi	nt Fundraising Representa	Leadership PAC Spo
esignated Agent: Identi	ed Organization Affiliated Committee X Joint Joi	nt Fundraising Representa	Leadership PAC Spe
esignated Agent: Identi	ed Organization Affiliated Committee X Joint Joi	nt Fundraising Representa	Leadership PAC Spe
esignated Agent: Identi	Affiliated Committee X Joint J	nt Fundraising Representa	Leadership PAC Specialists  Leadership PAC Specialists  ZIP CODE
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint J		
esignated Agent: Identification of Bank, Connected Esignated Agent: Identification of Connected Esignated	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification of the composite of the c	Affiliated Committee X Joint J	STATE A  Telephone Number	ZIP CODE A

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

h). <b>Joint Fundraisi</b>	• •		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
BRITT SENATE VIC	TORY 		
Mailing Address	250 COMMERCE STREET		
	3RD FLOOR SUITE 6		
	MONTGOMERY	AL	36104
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Representa	Leadership PAC Sp
		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which anintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which anintains funds.	STATE A  Telephone Number	ZIP CODE A

Dogo	of 66
Page	of oo

(h). <b>Joint Fundraisin</b> o	Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Sponsor
FISCHER VICTORY	FUND		
Mailing Address	228 S WASHINGTON ST.		
	SUITE 115		
	ALEXANDRIA	ı VA	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
		oint Fundraising Representa	
Connected esignated Agent: Identify	by name, address (phone number - optional)		
esignated Agent: Identify			
esignated Agent: Identify  Full Name			
esignated Agent: Identify  Full Name			
esignated Agent: Identify  Full Name	by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name	by name, address (phone number – optional)	STATE A Telephone Number	ZIP CODE <b>A</b>

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

5(g) c	or(h). Joint Fundraisir	ng Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3		FEC ID number	C
	4.		FEC ID number	С
6.	Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Sponsor
	UPHOLD THE SENA			·
	Mailing Address	228 S WASHINGTON ST STE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Sponsor
8.	Full Name	y by name, address (phone number – optiona		
	Mailing Address	1		1
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	I ▼	STATE A Telephone Number	ZIP CODE <b>A</b>
9.	Banks or Other Depositor safety deposit boxes or m	<b>pries:</b> List all banks or other depositories in waintains funds.	Telephone Number	ts funds, holds accounts, rents
9.	Banks or Other Depositors safety deposit boxes or more Name of Bank, Depository, etc.	<b>pries:</b> List all banks or other depositories in waintains funds.	Telephone Number	ts funds, holds accounts, rents
9.	Banks or Other Depositor safety deposit boxes or m	<b>pries:</b> List all banks or other depositories in waintains funds.	Telephone Number	ts funds, holds accounts, rents

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

1.							
				FEC II	O number	C	
2. 🔲		<u> </u>		FEC II	O number	С	
3. 🗔				FEC II	O number	С	
4.		1 1 1 1 1		FEC II	O number	С	
lame of	Any Connected	Organization, Affil	liated Committee, Joint	Fundraising Re	presentative	e, or Leadership	PAC Spons
TEAM	SUNUNU						
Mail	ling Address	824 S. MILLEDG	GE AVE				
		STE.101					
		ATHENS			GA	30605	
	and a second of		CITY A		STATE ▲	ZIP	CODE A
		Organization by name, address	Affiliated Committee	Joint Fundraisin	g Representa	ative Leaders	ship PAC Sp
	Connected				g Representa	Leaders	ship PAC Sp
<b>esignate</b> Full N	Connected				g Representa	Leaders	ship PAC Sp
esignate	Connected ed Agent: Identify				g Representa	Leaders	ship PAC Sp
<b>esignate</b> Full N	Connected ed Agent: Identify				g Representa	Leaders Leaders	ship PAC Sp
<b>esignate</b> Full N Mailin	Connected ed Agent: Identify	by name, address		nal)	g Representa		ship PAC Sp