**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. Nevada State Democratic Party 2310 Paseo del Prado ADDRESS (number and street) Suite A120 (Check if address is changed) Las Vegas 89102 NVCITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address smaki@nvdems.com is changed) Optional Second E-Mail Address chris@pattonprocessing.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00208991 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 Hinyard, Leilani,, Date 03 31 2024 Signature of Treasurer Hinyard, Leilani, , , 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. (Complete the information below.)   | candidate          |
| Name of   |                    |
| Candidate '''' '''' '''' '''  |                    |
| Candidate Office Party Affiliation Sought: House Senate President   | State              |
|   | District           |
| (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.   |                    |
| Name of  Candidate  |                    |
|   |                    |
| Party Committee:  (National, State (Democratic,   |                    |
| (d) X This committee is a STA or subordinate) committee of the DEM Republican, 6  | etc.) Party        |
| Political Action Committee (PAC):   |                    |
| (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected  | organization is a: |
| Corporation Corporation w/o Capital Stock Labor Org   | anization          |
| Membership Organization Trade Association Cooperation   |                    |
|   | ve                 |
| In addition, this committee is a Lobbyist/Registrant PAC.   |                    |
| (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)   | fund or party      |
| In addition, this committee is a Lobbyist/Registrant PAC.   |                    |
| In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)  |                    |
| (g) This committee is an independent expenditure-only political committee (Super PAC).  |                    |
| In addition, this committee is a Lobbyist/Registrant PAC.   |                    |
| (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC  | <del>;</del> ).    |
| In addition, this committee is a Lobbyist/Registrant PAC.   |                    |
| Joint Fundraising Representative:   |                    |
| (i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate. | more political     |
| (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.         | more political     |
| Committees Participating in Joint Fundraiser  |                    |
| 1.   , , , , , , , , , , , , , , , , , ,  |                    |
|   |                    |

|    | FEC Form 1 (Revised 0                                      | 2/2009)   |                                | Page <b>3</b>                   |
|----|--|---|--------------------------------|---------------------------------|
| ٧  | Vrite or Type Committee Name                               |   |                                | . ~g~ <b>~</b>                  |
|    | Nevada State De  | emocratic Party   |                                |                                 |
| 6. |  | ganization, Affiliated Committee, Joint I                     | Fundraising Representativ      | e, or Leadership PAC Sponsor    |
|    | Horsford Victory Fund                                      | d 2020  |                                |                                 |
|    |  |   |                                |                                 |
|    | Mailing Address  | 4904 Camino Al Norte  |                                |                                 |
|    |  | #336664   |                                |                                 |
|    |  | North Las Vegas   | NV NV                          | 89033                           |
|    |  | CITY ▲  | STATE 4                        | ZIP CODE ▲                      |
|    | Relationship: Connected                                    | Organization Affiliated Organization                          | Joint Fundraising Represe      | ntative Leadership PAC Sponso   |
| 7. | Custodian of Records: Ident books and records.             | fy by name, address (phone number optic                       | onal) and position of the pers | son in possession of committee  |
|    | Hinyard, Le  | ilani, , ,  |                                |                                 |
|    | Full Name  | 2310 Paseo Del Prado, A120                                    |                                |                                 |
|    | Mailing Address  | 2310 Faseo Dei Flado, A120                                    |                                |                                 |
|    |  |   |                                |                                 |
|    |  | Las Vegas   | NV NV                          | 89102                           |
|    |  | CITY ▲  | STATE 4                        | ZIP CODE ▲                      |
|    | Title or Position ▼  |   |                                |                                 |
|    | Treasurer  |   | Telephone number               | 702                             |
| 8. | Treasurer: List the name and any designated agent (e.g., a | l address (phone number optional) of the ssistant treasurer). | ne treasurer of the committe   | ee; and the name and address of |
|    | Full Name Hinyard, Le of Treasurer                         | ilani, , ,  |                                |                                 |
|    | Mailing Address  | 2310 Paseo Del Prado, A120                                    |                                |                                 |
|    |  |   |                                |                                 |
|    |  | Las Vegas   | NV NV                          | 89102                           |
|    |  | CITY ▲  | STATE 4                        | ZIP CODE ▲                      |
|    | Title or Position ▼    Treasurer                           |   | Telephone number               | 702  -  737  -  8683            |

| FEC Form 1                           | (Revised 02/2009)   |                   | Page <b>4</b>              |
|--------------------------------------|---|-------------------|----------------------------|
| Full Name of<br>Designated<br>Agent  |   |                   |                            |
| Mailing Address                      |   |                   |                            |
|                                      |   |                   |                            |
|                                      |   |                   |                            |
|                                      | CITY ▲  | STATE ▲           | ZIP CODE ▲                 |
| Title or Position <b>▼</b>           |   |                   |                            |
|                                      | Telephone n   | umber             |                            |
| Banks or Other<br>safety deposit box | <b>Depositories:</b> List all banks or other depositories in which the commines or maintains funds. | ittee deposits fu | nds, holds accounts, rents |
| Name of Bank, D                      | epository, etc.   |                   |                            |
|                                      | Nevada State Bank   |                   |                            |
| Mailing Address                      | 3480 West Sahara Ave.   |                   |                            |
|                                      |   |                   |                            |
|                                      | Las Vegas   | NV                | 89102                      |
|                                      | CITY ▲  | STATE ▲           | ZIP CODE ▲                 |
| Name of Bank, D                      | epository, etc.   |                   |                            |
|                                      | Bank of America   |                   |                            |
| Mailing Address                      | 701 Second Avenue   |                   |                            |
|                                      |   |                   |                            |
|                                      | Seattle   | Ŭ WA □            | 98104                      |
|                                      | CITY ▲  | STATE ▲           | ZIP CODE ▲                 |
|                                      |   |                   |                            |

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| Page | of | 1-7 |  |

| 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                         |
|   |   | •                          |                           |
| -   | Organization, Affiliated Committee, Joint Fu  | ndraising Representativ    | e, or Leadership PAC Spon |
| NV Party Victory Fu   | 10  |                            |                           |
|   |   |                            |                           |
| Mailing Address   | 430 S Capitol St., SE   |                            |                           |
|   |   |                            |                           |
|   | Washington  | DC                         | 20003                     |
| Relationship:   | CITY ▲  | STATE ▲                    | ZIP CODE ▲                |
|   | Affiliated Committee X July 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  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or m                                      | cories: List all banks or other depositories in whi aintains funds.  A Fayetteville Street  | 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. | cories: List all banks or other depositories in white aintains funds.  CITY A  CITY A  Dries: List all banks or other depositories in white aintains funds. | STATE A Telephone Number   | ZIP CODE A                |

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

| 1   |  |                         |                            |
|---|--|-------------------------|----------------------------|
| 2.  |  | FEC ID number           | С                          |
|   |  | FEC ID number           | C                          |
| 3.  |  | FEC ID number           | С                          |
| 4.  |  | FEC ID number           | С                          |
|   |  |                         |                            |
| Name of Any Connected (<br>Biden Victory Fund | Organization, Affiliated Committee, Joint Fund | raising Representative  | e, or Leadership PAC Spons |
|   |  |                         |                            |
|   |  |                         |                            |
| Mailing Address                               | 430 South Capitol Street, SE                   |                         |                            |
|   |  |                         |                            |
|   | Washington                                     | DC                      | 20003                      |
| Relationship:                                 | CITY A   | STATE ▲                 | ZIP CODE ▲                 |
| esianated Agent: Identify                     | by name address (phone number – ontional)      |                         |                            |
|   | by name, address (phone number - optional)     |                         |                            |
| Full NameMailing Address                      | by name, address (phone number – optional)     |                         |                            |
| Full Name                                     | by name, address (phone number – optional)     |                         |                            |
| Full Name                                     | by name, address (phone number – optional)     |                         |                            |
| Full Name                                     | CITY   | STATE A                 | ZIP CODE A                 |
| Full Name                                     | CITY A   | STATE A elephone Number | ZIP CODE A                 |

| D    | <b>-</b> 4 14 |  |
|------|---------------|--|
| Page | of 14         |  |

| h). <b>Joint</b>                   |                         | Participant:                  |  |                    |                     |                  |              |
|------------------------------------|-------------------------|-------------------------------|--|--------------------|---------------------|------------------|--------------|
| 1.                                 |                         |                               |  | FEC                | ID number           | C                |              |
| 2.                                 | <u> </u>                |                               |  | FEC                | ID number           | С                |              |
| 3.                                 |                         |                               |  | FEC                | ID number           | С                |              |
| 4.                                 |                         |                               |  | FEC                | ID number           | С                |              |
|                                    |                         |                               |  |                    |                     |                  |              |
| ame of Any (                       | Connected C             | rganization, Aff              | filiated Committee, Joint                                | Fundraising Re     | epresentativ        | e, or Leadership | PAC Spons    |
| Democratic                         | Grassroots              | Victory Fund                  |  |                    | 1 1 1 1             | 1 1 1 1 1 1      | 1 1 1 1      |
|                                    |                         |                               |  |                    |                     |                  |              |
|                                    |                         |                               |  |                    |                     |                  |              |
| Mailing A                          | ddress                  | 430 South Cap                 | itol Street, SE  |                    |                     |                  |              |
|                                    |                         |                               |  |                    |                     |                  |              |
|                                    |                         | Washington                    |  |                    | DC                  | 20003            |              |
|                                    |                         |                               |  |                    | CTATE A             | 7IP              | CODE ▲       |
| Relationsl                         | Connected               | Organization  oy name, addres | CITY ▲  Affiliated Committee  Ses (phone number – option | S Joint Fundraisin | STATE Ang Represent |                  |              |
|                                    | Connected               |                               | Affiliated Committee                                     |                    |                     |                  |              |
| esignated Ag                       | Connected ent: Identify |                               | Affiliated Committee                                     |                    |                     |                  | rship PAC Sp |
| esignated Ag Full Name             | Connected ent: Identify |                               | Affiliated Committee                                     |                    |                     |                  |              |
| esignated Ag Full Name             | Connected ent: Identify |                               | Affiliated Committee                                     |                    |                     |                  |              |
| esignated Ag Full Name Mailing Add | ent: Identify           | by name, addres               | Affiliated Committee                                     |                    |                     | ative Leade      |              |
| esignated Ag Full Name Mailing Add | Connected ent: Identify | by name, addres               | Affiliated Committee                                     |                    | ng Representa       | ative Leade      | rship PAC Sp |

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

| (h). <b>Joint Fundraisi</b>   | .g . a  |  |                            |
|---|---|--|----------------------------|
| 1.  |   | FEC ID number                                  | С                          |
| 2.  |   | FEC ID number                                  | C                          |
| 3.  |   | FEC ID number                                  | C                          |
| 4   |   | FEC ID number                                  | C                          |
| -   | Organization, Affiliated Committee, Joint Fund  | raising Representativ                          | e, or Leadership PAC Spons |
|   |   |  |                            |
| Mailing Address   | 114 BEAUCHAMP LANE  |  |                            |
|   |   |  |                            |
| Relationship:   | LAFAYETTE CITY A  | LA<br>STATE A                                  | 70506<br>ZIP CODE ▲        |
|   |   |  | _                          |
|   | Affiliated Committee X Joint by by name, address (phone number – optional)  | t Fundraising Represent                        | ative Leadership PAC Spo   |
|   |   | t Fundraising Represent                        | ative Leadership PAC Spo   |
| Designated Agent: Identi  |   | t Fundraising Represent                        | ative Leadership PAC Spo   |
| Pesignated Agent: Identi  |   | t Fundraising Represent                        | Leadership PAC Spo         |
| Pesignated Agent: Identi  | fy by name, address (phone number – optional)   |  |                            |
| Pesignated Agent: Identi  | fy by name, address (phone number – optional)   | t Fundraising Represent                        | ZIP CODE A                 |
| Pesignated Agent: Identi  Full Name L  Mailing Address                  | fy by name, address (phone number – optional)  CITY   |  |                            |
| Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION | fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which                 | STATE A elephone Number  the committee deposit | ZIP CODE A                 |
| Pesignated Agent: Identic Full Name                                     | fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which                 | STATE A elephone Number  the committee deposit | ZIP CODE A                 |
| Pesignated Agent: Identi  Full Name                                     | fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds. | STATE A elephone Number  the committee deposit | ZIP CODE A                 |
| Pesignated Agent: Identi  Full Name                                     | fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds. | STATE A elephone Number  the committee deposit | ZIP CODE A                 |

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| Page | Oī |    |  |

| 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          | C                             |
| ame of Any Connected   | l Organization, Affiliated Committee, Joint Fund                                     | raising Representative | or Leadership PAC Spon        |
| NEVADA DEMOCRA   |  |                        |                               |
|  |  |                        |                               |
| Mailing Address  | 1465 TERMINAL WAY #1   |                        |                               |
|  |  |                        |                               |
|  | RENO   | , ,   NV               | 89502                         |
| Relationship:  | CITY A   | STATE A                | ZIP CODE ▲                    |
| esignated Agent: Identi  | fy by name, address (phone number – optional)  |                        |                               |
| esignated 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 A                | ZIP CODE A                    |
| Full Name Mailing Address  TITLE OR POSITION   | CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds. | elephone Number        | s funds, holds accounts, rent |
| Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,                 | CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds. | Telephone Number       | s funds, holds accounts, rent |
| Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc. | CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds. | Telephone Number       | s funds, holds accounts, rent |
| Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc. | CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds. | Telephone Number       | s funds, holds accounts, rent |

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|------|------------------|--|
| Page | of <sup>14</sup> |  |

| 1. <u></u> |                 | p Participant:          |                     |                 |             |                           |
|------------|-----------------|-------------------------|---------------------|-----------------|-------------|---------------------------|
| 2          |                 |                         |                     | FEC ID          | number      | С                         |
|            |                 |                         |                     | FEC ID          | number      | С                         |
| 3.         |                 |                         |                     | FEC ID          | number      | С                         |
| 4.         |                 | 1 1 1 1 1 1 1           |                     | <br>  FEC ID    | number      | С                         |
|            |                 |                         |                     |                 |             |                           |
| lame of    | Any Connected ( | Organization, Affiliate | ed Committee, Joint | Fundraising Rep | resentative | e, or Leadership PAC Spon |
| NEVA       | ADA SENATE VI   | CTORY 2024              |                     |                 |             |                           |
|            |                 |                         |                     |                 |             |                           |
|            |                 | 120 MARYLAND AV         | /F NF               |                 |             |                           |
| Mai        | iling Address   |                         |                     |                 |             |                           |
|            |                 |                         |                     |                 |             |                           |
|            |                 | WASHINGTON              |                     |                 | DC          | 20002                     |
| Rela       | ationship:      |                         | CITY A              |                 | STATE 🛦     | ZIP CODE ▲                |
| Full N     | Name            |                         |                     |                 |             |                           |
| Mailin     | ng Address      |                         |                     |                 |             |                           |
|            |                 |                         |                     |                 |             |                           |
|            |                 |                         |                     |                 |             |                           |
|            |                 |                         |                     |                 |             |                           |
| TITL       | E OR POSITION   | <b>▼</b>                | CITY A              | <u> </u>        | STATE A     | ZIP CODE ▲                |

|      |    | 14  |  |
|------|----|-----|--|
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| 1      |               | Participant:    |                      |                   |             |                            |
|--------|---------------|-----------------|----------------------|-------------------|-------------|----------------------------|
| 2      |               |                 |                      | FEC ID            | number      | С                          |
|        |               | <u> </u>        |                      | FEC ID            | number      | С                          |
| 3.     |               |                 |                      | FEC ID            | number      | С                          |
| 4.     |               |                 |                      | <br>  FEC ID      | number      | С                          |
|        |               |                 |                      |                   |             |                            |
|        | -             |                 | ted Committee, Joint | Fundraising Rep   | resentative | e, or Leadership PAC Spons |
| SUSII  | E LEE VICTORY | FUND 2024       |                      |                   |             |                            |
|        |               |                 |                      |                   |             |                            |
| Ma     | iling Address | 5130 S FORT APA | ACHE RD              |                   |             |                            |
| IVIG   | ming Address  | STE 215-382     |                      |                   |             |                            |
|        |               | LAS VEGAS       |                      |                   | NV          | 89148                      |
| Rel    | lationship:   |                 | CITY A               |                   | STATE A     | ZIP CODE ▲                 |
|        |               | Organization A  |                      | Joint Fundraising |             |                            |
| Full N | Name          |                 |                      |                   |             |                            |
| Mailir | ng Address    |                 |                      |                   |             |                            |
|        |               |                 |                      |                   |             |                            |
|        |               |                 |                      |                   |             |                            |
|        |               |                 |                      |                   |             |                            |
| TITL   | E OR POSITION | <b>▼</b>        | CITY A               |                   | STATE A     | ZIP CODE ▲                 |

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

| 5(g) or (h          | n). Joint Fundraising  | g Participant:   |                       |                                 |
|---------------------|--|--|-----------------------|---------------------------------|
|                     | 1.   |  | FEC ID number         | C                               |
|                     | 2.   |  | FEC ID number         | C                               |
|                     | 3.   |  | FEC ID number         | C                               |
|                     | 4.   |  | FEC ID number         | С                               |
|                     | -  | Organization, Affiliated Committee, Joint Fundrai  | sing Representativ    | e, or Leadership PAC Sponsor    |
| L                   |  |  |                       |                                 |
|                     |  |  |                       |                                 |
|                     | Mailing Address  | 401 2ND AVE S STE 303  |                       |                                 |
|                     |  |  |                       |                                 |
|                     | Relationship:  | SEATTLE CITY A   | WA<br>STATE ▲         | 98104<br>ZIP CODE ▲             |
|                     |  |  | fundraising Represent |                                 |
|                     |  |  |                       |                                 |
| 8. <b>De</b>        |  | by name, address (phone number – optional)   |                       | I                               |
| 8. <b>De</b>        | Full Name  | by name, address (phone number – optional)   |                       | <u> </u>                        |
| 8. <b>De</b>        |  | by name, address (phone number – optional)   |                       |                                 |
| 8. <b>De</b>        | Full Name  | by name, address (phone number – optional)   |                       |                                 |
| 8. <b>De</b>        | Full Name  |  | CTATE A               | 7ID CODE A                      |
| 8. <b>De</b>        | Full Name  | CITY A   | STATE A               | ZIP CODE A                      |
| 8. <b>De</b>        | Full Name Mailing Address  | CITY A   | STATE A               | ZIP CODE <b>A</b>               |
| 9. <b>Ba</b><br>sat | Full Name Mailing Address  TITLE OR POSITION   | CITY   CITY   Tele  Ties: List all banks or other depositories in which the intains funds. | ephone Number         | ts funds, holds accounts, rents |
| 9. <b>Ba</b><br>sat | Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or ma                                  | CITY   CITY   Tele  Ties: List all banks or other depositories in which the intains funds. | ephone Number         | ts funds, holds accounts, rents |
| 9. <b>Ba</b><br>sat | Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main arme of Bank, expository, etc. | CITY   CITY   Tele  ries: List all banks or other depositories in which th intains funds.  | ephone Number         | ts funds, holds accounts, rents |
| 9. <b>Ba</b><br>sat | Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or main arme of Bank, expository, etc. | CITY   CITY   Tele  ries: List all banks or other depositories in which th intains funds.  | ephone Number         | ts funds, holds accounts, rents |

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| 1       |                               |                     |                        |                   |             |                          |      |
|---------|-------------------------------|---------------------|------------------------|-------------------|-------------|--------------------------|------|
| 1       |                               |                     |                        | FEC ID            | number      | С                        |      |
| 2       |                               |                     |                        | FEC ID            | number      | С                        |      |
| 3       |                               |                     |                        | FEC ID            | number      | C                        | Ξ    |
| 4       |                               |                     |                        | FEC ID            | number      | С                        | Ξ    |
| lame of | Any Connected (               | Organization Affili | isted Committee Joint  | Fundraising Ren   | resentative | e, or Leadership PAC Spo | nns  |
|         | A 2024 VICTOR                 |                     |                        |                   |             |                          |      |
|         |                               |                     |                        |                   |             |                          |      |
| Mai     | iling Address                 | 401 2ND AVE S       |                        |                   |             |                          |      |
|         |                               | STE 303             |                        |                   |             |                          |      |
|         |                               | SEATTLE             |                        |                   | L WA _      | 98104                    |      |
| Rel     | ationship:                    |                     | CITY A                 |                   | STATE A     | ZIP CODE A               |      |
| esignat | Connected  ed Agent: Identify |                     | (phone number – option | Joint Fundraising |             |                          | -Sp  |
| esignat | ed Agent: Identify            |                     |                        |                   |             |                          | - Sp |
| Full N  | ed Agent: Identify            |                     |                        |                   |             |                          | - J  |
| Full N  | ed Agent: Identify            |                     |                        |                   |             |                          | Sp   |
| Full N  | ed Agent: Identify            |                     |                        |                   |             |                          |      |
| Full N  | ed Agent: Identify            | by name, address    |                        | nal)              | STATE A     | 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  | l Organization, Affiliated Committee, Joint Fund   | draising Representative   | e, or Leadership PAC Spons |
| MT NV VICTORY FU  | JND  |                           |                            |
|   |  |                           |                            |
| Mailing Address   | 611 PENNSYLVANIA AVE SE  |                           | 1 1 1 1 1 1 1 1 1          |
|   | SUITE 143  |                           |                            |
|   | WASHINGTON   | DC                        | 20003                      |
| Relationship:   | CITY A   | STATE ▲                   | ZIP CODE ▲                 |
| Connecte  |  | nt Fundraising Representa | ative Leadership PAC Sp    |
| Connecte  | ed Organization Affiliated Committee X Joi   | nt Fundraising Representa | ative Leadership PAC Sp    |
| Connecte esignated Agent: Identi  | ed Organization Affiliated Committee X Joi   | nt Fundraising Representa | Leadership PAC Sp          |
| esignated Agent: Identi   | ed Organization Affiliated Committee X Joi   | nt Fundraising Representa | Leadership PAC Sp          |
| esignated Agent: Identi   | ed Organization Affiliated Committee X Joi   | nt Fundraising Representa | Leadership PAC Sp          |
| esignated Agent: Identi   | Affiliated Committee X Joinfy by name, address (phone number – optional)   | nt Fundraising Representa | Leadership PAC Sp          |
| esignated Agent: Identi  Full Name  Mailing Address   | Affiliated Committee X Joint J |                           |                            |
| esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  | Affiliated Committee X Joint J | STATE A                   | 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. | Affiliated Committee X Joint J | STATE A Telephone Number  | ZIP CODE A                 |