Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Common Values PAC 901 N Washington St, Suite 700 ADDRESS (number and street) (Check if address is changed) Alexandria 22314 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS tim@kochandhoos.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.commonvaluespac.com (Check if address is changed) DATE 09 2022 C00442368 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Koch, Timothy, A.,, Type or Print Name of Treasurer Koch, Timothy, A.,, [Electronically Filed] 09 06 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (F	Revised 03/2022)	Page 2
. TYPE OF (COMMITTEE:	
Candidate	e Committee:	
(a) Ti	his committee is a principal campaign committee. (Complete the candidate information below.)	
1 1	this committee is an authorized committee, and is NOT a principal campaign committee. (Complete to information below.)	the candidate
Name of Candidate	9	
Candidate Party Affil		State District
(c) Ti	his committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida		
Party Cor		
(d) T	Chis committee is a (National, State (Democration or subordinate) committee of the Republication	tic, n, etc.) Party
Political A	Action Committee (PAC):	
(e) Ti	his committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is a:
	Corporation Corporation w/o Capital Stock Labor	Organization
	Membership Organization Trade Association Cooper	rative
	In addition, this committee is a Lobbyist/Registrant PAC.	
1.1	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregat ommittee. (i.e., nonconnected committee)	ed 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) TI	his committee is an independent expenditure-only political committee (Super PAC).	
_	In addition, this committee is a Lobbyist/Registrant PAC.	
(h) TI	his committee is a political committee with both contribution and non-contribution accounts (Hybrid F	PAC).
	In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fun	draising Representative:	
(1)	his committee collects contributions, pays fundraising expenses and disburses net proceeds for two ommittees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(1)	this committee collects contributions, pays fundraising expenses and disburses net proceeds for two ommittees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Committ	tees Participating in Joint Fundraiser	
1.	C	

•	FEC Form 1 ((Revised 02/2009)	Page 3
٧	Vrite or Type Commit	ttee Name	
	Common	Values PAC	
6.	Name of Any Con Barrasso, Se	nnected Organization, Affiliated Committee, Joint Fundraising Representative, or I	_eadership PAC Sponsor
		:::. JOHH, , ,	
	Mailing Address	6896 Casper Mountain Rd	
		Casper	82601
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative	x Leadership PAC Sponso
	neialionship.	Allilated Organization John Fundraising Representative	Leadership FAC Sponso
7.	Custodian of Reco	ords: Identify by name, address (phone number optional) and position of the person in ps.	ossession of committee
	ı	Koch, Timothy, A., ,	
	Full Name		
	Mailing Address	901 N Washington St, Suite 700	
		Alexandria VA	22314
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
			299 8571
	Treasurer	Telephone number	
_			
8.		e name and address (phone number optional) of the treasurer of the committee; and pent (e.g., assistant treasurer).	I the name and address of
	Full Name	Koch, Timothy, A., ,	
	of Treasurer		
	Mailing Address	901 N Washington St, Suite 700	
		Alexandria	22314
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	Treasurer	703	_ 299 _ 8571
		Telephone number	

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Full Name of Designated Agent	Koch, Theodore, V., ,	
Mailing Address	901 N Washington St, Suite 700	
	Alexandria VA 22314	
Title or Position		ZIP CODE ▲
Assistant Treasur		299 - 8570
	Depositories: List all banks or other depositories in which the committee deposits funds, holds exes or maintains funds.	accounts, rents
Name of Bank, D	Depository, etc.	
	Wells Fargo	
Mailing Address	330 N Washington St	
	Alexandria VA 22314	
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.	
	Bank of America	
Mailing Address	600 N Washington St	
	Alexandria VA 22314	
	CITY ▲ STATE ▲	ZIP CODE ▲

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

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blemental information) or (h), 6, 8 and/or 9 Page $\frac{5}{2}$ of $\frac{7}{2}$

h). Joint Fundraisi r		FEC ID nu	_{imber} C	
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3.		FEC ID nu	ımber C	<u>, , , , , , , , , , , , , , , , , , , </u>
4		FEC ID nu	ımber C	
ame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Repres	entative, c	or Leadership PAC Spor
BARRASSO VIC	ΓORY 2024			
Mailing Address	901 N WASHINGTON ST			
	SUITE 700			
	ALEXANDRIA		VA	22314
Relationship:	CITY A	 S1	ATE A	ZIP CODE ▲
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	d Organization Affiliated Committee	Joint Fundraising Re	presentative	e Leadership PAC S
			presentative	e Leadership PAC S
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esignated Agent: Identif			presentative	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optio	nal)		
esignated Agent: Identif	y by name, address (phone number – optio	nal)	presentative	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	901 N WASHINGTON ST		
, and the second	SUITE 700		
	AL EVANDRIA	, VA	22314
	ALEXANDRIA		
	CITY A	STATE ▲ nt Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address	CITY A d Organization Affiliated Committee y Join y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	CITY A d Organization Affiliated Committee y Join y by name, address (phone number – optional) CITY A		

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

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•	l Organization, Affiliated Committee, Joint Fundr LKER LAXALT VICTORY COMMITTE	• .	e, or Leadership PAC Spons
Mailing Address	901 N WASHINGTON ST		
	SUITE 700		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee	Fundraising Represent	Leadership PAC Sp
		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
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