**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. Valadao For Congress 5132 North Palm Avenue ADDRESS (number and street) #227 (Check if address is changed) Fresno 93704 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address valleyvision559@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00499392 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 Allen, Melissa,, Date 03 19 2025 Signature of Treasurer Allen, Melissa, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

E	Form 1 (Revised 03/2022)	ge <b>2</b>
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	a) X This committee is a principal campaign committee. (Complete the candidate information below.)	
	b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidatinformation below.)	ate
	Name of Candidate Valadao, David, , ,	
	Candidate Party Affiliation REP Office Sought: X House Senate President Distriction	-
	c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	d) This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Particularly committee of the Committe	rty
	Political Action Committee (PAC):	
	e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	zation is a:
	Corporation Corporation w/o Capital Stock Labor Organization	on
	Membership Organization Trade Association Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or committee. (i.e., nonconnected committee)	r party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more p committees/organizations, at least one of which is an authorized committee of a federal candidate.	olitical
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more p committees/organizations, none of which is an authorized committee of a federal candidate.	olitical
	Committees Participating in Joint Fundraiser	
	1	

•	FEC Form 1 (Revised 0	2/2009)		Page <b>3</b>
٧	Vrite or Type Committee Name			
	Valadao For Cor	ngress		
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fund	Iraising Representative	, or Leadership PAC Sponsor
	Vitoria PAC			
	Mailing Address	5132 North Palm Avenue		
		Fresno	L CA	93704
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization Jo	oint Fundraising Represen	tative Leadership PAC Sponso
7.	Custodian of Records: Idention books and records.	ify by name, address (phone number optional)	and position of the perso	on in possession of committee
	Allen, Melis	ssa, , ,		
	Mailing Address	5132 N Palm Ave #227		
		Fresno	CA L	93704
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Record Keeper		elephone number	916 - 548 - 2825
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the transistant treasurer).	easurer of the committee	e; and the name and address of
	Full Name Allen, Melis	ssa, , ,		
	Mailing Address	5132 N Palm Ave #227		
	maining Address			
		Fresno	CA	93704
		CITY ▲	STATE A	ZIP CODE ▲
	Title or Position ▼	0111	SIAIL	ZII OODL =
	Treasurer		elephone number	916 548

FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent			
Mailing Address			
B ::-		STATE A	ZIP CODE ▲
Title or Position			
	Telephone num	nber	
. Banks or Other safety deposit bo	<b>Depositories:</b> List all banks or other depositories in which the committee xes or maintains funds.	e deposits funds, l	holds accounts, rents
Name of Bank, [	Depository, etc.		
	Fresno First Bank		
Mailing Address	7690 North Palm Avenue		
	Fresno	CA 937	711
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, [	Depository, etc.		
	Chain Bridge Bank		
Mailing Address	1445-A Laughlin Ave		
	McLean	VA 221	01
	CITY ▲	STATE ▲	ZIP CODE ▲

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

Page \_\_\_ **of** \_\_\_\_\_

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	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Grow the Majority Ca			
Mailing Address	228 S Washington St Ste 115		
	Alexandria	VA VA	22314
	CITY ▲	STATE ▲	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Joint J		
esignated Agent: Identi	Affiliated Committee X Joint J	oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee X John Stranger of St		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or market and mar	Affiliated Committee    Affiliated Committee    Ty 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  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Journal of the price	STATE A Telephone Number	ZIP CODE A

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

Page \_\_\_ **of** \_\_\_\_

(h). <b>Joint Fundrais</b> i	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected Scalise Leadership	d Organization, Affiliated Committee, Joint Furnd 2024	ındraising Representativ	e, or Leadership PAC Spons
Mailing Address	320 1st St SE		
	Washington	DC L	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X	Joint Fundraising Represent	Leadership PAC Spo
Connect			Leadership PAC Spo
Connect			Leadership PAC Spo
Connect  Pesignated Agent: Ident  Full Name			Leadership PAC Spo
Connect  Pesignated Agent: Ident  Full Name			Leadership PAC Spo
Connect  Pesignated Agent: Ident  Full Name	fy by name, address (phone number – optiona		Leadership PAC Spo
Pesignated Agent: Identification  Full Name  Mailing Address	fy by name, address (phone number – optiona		
Connect Designated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Canks or Other Deposit afety deposit boxes or n	fy by name, address (phone number – optiona  CITY   CITY   Ories: List all banks or other depositories in what a sintains funds.  Business Bank  663 W Nees Ave	STATE A  Telephone Number	ZIP CODE A
Connect  Pesignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or not be boxes or not be become and the control of the contro	fy by name, address (phone number – optiona  CITY   CITY   Ories: List all banks or other depositories in what intains funds.  The Business Bank	STATE A Telephone Number	ZIP CODE A

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

Page \_\_\_ **of** \_\_\_\_\_

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
Grow the Majority			
Mailing Address	228 S Washington St Ste 115		
	Alexandria	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee X J		ative Leadership PAC Sp
esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited defety deposit boxes or marks and marks or mar	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
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, Truist	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
esignated 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  anks or Other Deposite afety deposit boxes or mame of Bank, epository, 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
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	city A  CITY A  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

Page \_\_\_ **of** \_\_\_\_\_

h). <b>Joint Fundraisi</b>	ng Farticipant.			
1.		FEC ID nu	mber	С
2.		FEC ID nu	mber	С
3.		FEC ID nu	mber	C
4.		FEC ID nu	mber	C
lame of Any Connected	I Organization, Affiliated Committee, Joint	Fundraising Represe	entative	, or Leadership PAC Spon
The Valadao Victory	Fund			
Mailing Address	5132 N Palm Ave #227			
	1		1 1	
	Fresno	1	CA	93704
Relationship:	CITY A	ST	ATE 🛦	ZIP CODE ▲
	ed Organization Affiliated Committee	Joint Fundraising Re	presenta	tive Leadership PAC S
esignated Agent: Identi			presenta	tive Leadership PAC S
esignated Agent: Identi			presenta	tive Leadership PAC S
esignated Agent: Identi			presenta	tive Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – option			Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – option	nal)	TE A	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – option	nal)	TE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, Truist	fy by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in aintains funds.	STAT	EE 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	fy by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in aintains funds.	STAT	EE A	ZIP CODE A
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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	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
Mailing Address	PO Box 341027		
Maining Addices			
	Austin	TX	78734
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected Agent: Identi		nt Fundraising Representa	
	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
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(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	C
lame of Any Connector	d Organization, Affiliated Committee, Joint Fun	draining Papracantativ	o or Londorphin PAC Spone
GT Farm Team 202		LI I I I I I I I I I	e, or Leadership FAC Spons
Mailing Address	PO Box 30844		
	Bethesda	MD MD	20824
Deletienshin	CITY ▲	STATE A	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC Sp
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Spo
Connecte  Pesignated Agent: Identi	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	Leadership PAC Spo
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Connecte  Designated Agent: Identi  Full Name	Affiliated Committee X Joint J	nt Fundraising Represent	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address	Affiliated Committee X Joint J		
Pesignated Agent: Identification of the Position of the Positi	Affiliated Committee	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Denoit afety deposit boxes or make the d	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A

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h). <b>Joint Fundraisi</b>	.g . a. a. o.pana			
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
	Organization, Affiliated Con	nmittee, Joint Fundrai	sing Representativ	e, or Leadership PAC Spon
Farmers for the Valle	y PAC			
Mailing Address	9460 Tegner Road			
	Hilmar 		CA	95324
Relationship:	CIT	Y <b>A</b>	STATE ▲	ZIP CODE ▲
	d Organization Affiliated C		undraising Represent	ative Leadership PAC Sp
	_		undraising Represent	Ative Leadership PAC Sp
esignated Agent: Identi	_		undraising Represent	Leadership PAC Sp
esignated Agent: Identi	_		undraising Represent	Leadership PAC Sp
esignated Agent: Identi	_		undraising Represent	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	y by name, address (phone n	umber — optional)	undraising Represent	Leadership PAC Spanisher
esignated Agent: Identi	y by name, address (phone n	umber – optional)		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone n	umber – optional)	STATE A	ZIP CODE A
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esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone not	umber – optional)  Tele epositories in which the	STATE A	ZIP CODE A
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# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	C
4.			FEC ID number	С
6. Name	of Any Connected O	rganization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
Am	nerican Battleground	Fund		
	Mailing Address	PO Box 30844		
		Bethesda	MD	20824
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected (			
	nated Agent: Identify I	by name, address (phone number – optional)		
Fi	nated Agent: Identify but the last of the	oy name, address (phone number – optional)		
Fi	nated Agent: Identify I	oy name, address (phone number – optional)		
Fi	nated Agent: Identify but the last of the	oy name, address (phone number – optional)		
Fu	nated Agent: Identify I	CITY A	STATE A	ZIP CODE A
Fu	nated Agent: Identify but the last of the	CITY A	STATE A	ZIP CODE A
Fu	nated Agent: Identify I	CITY A	STATE A	ZIP CODE A
Fu M	nated Agent: Identify It	CITY   CITY   Tele  es: List all banks or other depositories in which the tains funds.	phone Numbere committee deposit	ts funds, holds accounts, rents
9. Banks safety Name	nated Agent: Identify It	CITY   CITY   Tele  es: List all banks or other depositories in which the tains funds.	phone Number	ts funds, holds accounts, rents
9. Banks safety Name	nated Agent: Identify It all Name ailing Address  TITLE OR POSITION  s or Other Depositorie deposit boxes or main of Bank,	CITY   CITY   Tele  es: List all banks or other depositories in which the tains funds.	phone Numbere committee deposit	ts funds, holds accounts, rents
9. Banks safety Name	nated Agent: Identify It	CITY   CITY   Tele  es: List all banks or other depositories in which the tains funds.	phone Numbere committee deposit	ts funds, holds accounts, rents
9. Banks safety Name	nated Agent: Identify It	CITY   CITY   Tele  es: List all banks or other depositories in which the tains funds.	phone Numbere committee deposit	ts funds, holds accounts, rents

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h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representati	ve, or Leadership PAC Spon
Defend Our Majority	<u> </u>		
Mailing Address	320 First St SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
·			
Connecte			tative Leadership PAC Sp
esignated Agent: Identif	od Organization Affiliated Committee X		Leadership PAC Sp
Connecte esignated Agent: Identif	od Organization Affiliated Committee X		Leadership PAC Sp
esignated Agent: Identif	od Organization Affiliated Committee X		Leadership PAC Sp
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esignated Agent: Identif			
Connected Agent: Identified Mee Address	Affiliated Committee X		
connected signated Agent: Identification of the connected signature of t	Affiliated Committee X  Ty by name, address (phone number – optional  CITY   CITY   CITY   CITY   Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identification of Bank, Connected Esignated Agent: Identification of Connected Esignated Esign	Affiliated Committee X  Ty by name, address (phone number – optional  CITY   CITY   CITY   CITY   Dries: 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	Affiliated Committee X  Ty by name, address (phone number – optional  CITY   CITY   CITY   CITY   Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
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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
ame of Any Connected Scott Franklin Wingr	Organization, Affiliated Committee, Joint Inan Fund	Fundraising Representati	ve, or Leadership PAC Spon
Mailing Address	P.o. Box 2811		
	Lakeland	FL FL	33806
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
	d Organization Affiliated Committee	Joint Fundraising Represer	tative Leadership PAC Sp
			tative Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
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esignated Agent: Identi	y by name, address (phone number – option		ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address	y by name, address (phone number – option	al)	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in valintains funds.	al)  STATE   Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in valintains funds.	STATE A  Telephone Number	ZIP CODE A
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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
Protect the House 20	Organization, Affiliated Committee, Joint Full 024	ndraising Hepresentative	e, or Leadersnip PAC Spon
Mailing Address	PO Box 30844		
	Bethesda	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joby by name, address (phone number – optional)	oint Fundraising Represent	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	y by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	y by name, address (phone number – optional)		
esignated Agent: Identi  Full Name	CITY A  cries: List all banks or other depositories in whi aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afty deposit boxes or mane of Bank,	CITY A  cries: List all banks or other depositories in whi aintains funds.	STATE A  Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the deposite boxes or mame of Bank, epository, etc.	CITY A  cries: List all banks or other depositories in whi aintains funds.	STATE A  Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the deposite boxes or mame of Bank, epository, etc.	CITY A  cries: List all banks or other depositories in whi aintains funds.	STATE A  Telephone Number	ZIP CODE A

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

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
6. <b>Name</b>	of Any Connected O	rganization, Affiliated Committee, Joint Fundrais	sing Representativ	e, or Leadership PAC Sponsor
Em	mer Majority Builder	'S 		
I	Mailing Address	824 S. Milledge Ave. Ste. 101		
		Athens	GA GA	30605
I	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		by name, address (phone number – optional)		
Fu	nated Agent: Identify but the latest Agent and latest address	oy name, address (phone number – optional)		
Fu	II Name	by name, address (phone number – optional)		
Fu	II Name	by name, address (phone number – optional)		
Fu Ma	II Name	CITY A	STATE A	ZIP CODE A
Fu Ma	ailing Address	CITY A	STATE A	ZIP CODE A
Fu Ma	ailing Address	CITY  Tele  es: List all banks or other depositories in which the tains funds.	phone Number	s funds, holds accounts, rents
Fu Ma	ailing Address  ITLE OR POSITION   cor Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY  Tele  es: List all banks or other depositories in which the tains funds.	phone Numbere committee deposit	s funds, holds accounts, rents

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

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.	<u> </u>		FEC ID number	С
3.			FEC ID number	C
4.			FEC ID number	C
	of Any Connected O	rganization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
,	Mailing Address	228 S Washington St.		
·	valing / adicoo	Ste. 115		
F	Relationship:	Alexandria CITY A	VA VA STATE ▲	22314 ZIP CODE ▲
	Connected (	Organization Affiliated Committee X Joint Fu	undraising Representa	ative Leadership PAC Sponsor
	nated Agent: Identify b	y name, address (phone number – optional)		
Fu		y name, address (phone number – optional)		
Fu	II Name	y name, address (phone number – optional)		
Fu	II Name	y name, address (phone number – optional)		
Fu Ma	II Name	CITY A	STATE A	ZIP CODE A
Fu Ma	II Name	CITY A	STATE A	ZIP CODE A
9. Banks safety Name Deposit	II Name	CITY  Tele	phone Number	s funds, holds accounts, rents