FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	ORGANIZA	ATION		
i Ornwr i	(See instruction	s)		Office use only
NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
BATTLE BORN	I POLITICAL ACTION COMMITTE	E		
ADDRESS (number and	P.O. Box 370667			
(Check if address				
X is changed)	Las Vegas		LNV L	89137   -
		CITY	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-n	nail address)		
(Check if address is changed)	llisker@hdafec.com			
is onunged)				
(Check if address is changed)	PAGE ADDRESS (URL)			
2. DATE 0.3	/ 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		_	
3. FEC IDENTIFICA	TION NUMBER	C C00364596		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my know	vledge and belief it is true, correct	and complete	
Time or Drint Name of	Trageurer Lisa Lisker			
Type or Print Name of	Treasurer			
Signature of Treasurer	Electronically Filed by Lisa Lisker	r	Date 03	<b>20 20 200</b>
NOTE: Submission of fal	se, erroneous, or incomplete information may			
Office Use Only		For further informatio Federal Election Comm Toll Free 800-424-9530	ission	FEC FORM 1 (Revised 02/2009)

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5.	TYPE OF C	OMMITTEE (Check One)			
	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 Party Affiliati	Office Sought: House Senate President	State District		
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name of Candidate				
	Party Comn				
	(d)		Democratic, Republican,etc.) Party.		
	Political Ac	tion 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	r Organization		
		Membership Organization Trade Association Coo	perative		
		In addition, this committee is a Lobbyist/Registrant PAC.			
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated f committee. (i.e., nonconnected committee)	und or party		
		In addition, this committee is a Lobbyist/Registrant PAC.			
		X In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
	Joint Fundra	aising Representative:			
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or necommittees/organizations, at least one of which is an authorized committee of a federal candidate.	nore political		
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or r committees/organizations, none of which is an authorized committee of a federal candidate.	nore political		
	Com	mittees Participating in Joint Fundraiser			
		1. FEC ID number C			
		2. FEC ID number			
		3 FEC ID number C			
		EEC ID number			

**Treasurer** 

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W	rite or Type Committee Name			
	BATTLE BORN POLITICA	AL ACTION COMMITTEE		
6.	Name of Any Connected Orga	anization, Affiliated Committee, Joint Fun	draising Representative, or Leade	rship PAC Sponsor
	JOHN E ENSIGN		raising Representative, or Leadership PAC Sponsor  NV 89126 -  STATE X ZIP CODE X  Telephone number 703 - 549 - 7705  Taising Representative X Leadership PAC Sponsor  ZIP CODE X  Telephone number 703 - 549 - 7705	
1				
	Mailing Address	PO BOX 26568		
		LAS VEGAS	<u> </u>	89126   _
		CITY▲	STATE <b>≜</b>	ZIP CODE A
	Relationship:			
	Connected Organization	Affiliated Committee Join	nt Fundraising Representative X	Leadership PAC Sponsor
	possession of Committee by Lisa Lisa Full Name  Mailing Address		Ste. 115	
		Alexandria	VA	22314
	Title or Position ▼  Treasurer	CITY A		
8.		nd address (phone number optional designated agent (e.g., assistant treas		itee; and the
	Full Name of Treasurer Lisa Lis	ker		
Mailing Address 228 S. Washington St., Ste. 115				
		Alexandria	VA	22314

703

Telephone number

549

7705

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Full Name of Designated Agent	Keith Davis		
Mailing Address	228 S. Washington St., S	Ste. 115	
	Alexandria		22314 –
Title or Position ▼	CITY A	STATE A	ZIP CODE A
Ass	sistant Treasurer	Telephone number 703	
Name of Bank, Depo		ich the committee deposits funds, h	olds accounts, rents
	or maintains funds.  pository, etc.  Wachovia	ich the committee deposits funds, h	olds accounts, rents
	or maintains funds. Ository, etc.	ich the committee deposits funds, h	olds accounts, rents
Name of Bank, Depo	or maintains funds.  pository, etc.  Wachovia	ich the committee deposits funds, h	olds accounts, rents
Name of Bank, Depo	wachovia 7901 Wisconsin Ave.		
Name of Bank, Depo	wachovia 7901 Wisconsin Ave. Bethesda CITY	MD	20814   _
Name of Bank, Depo	wachovia 7901 Wisconsin Ave. Bethesda CITY	MD	20814   _
Name of Bank, Depo	wachovia  7901 Wisconsin Ave.  Bethesda  CITY   Desitory, etc.	MD	20814   _
Name of Bank, Depo	Pository, etc.  Wachovia  7901 Wisconsin Ave.  Bethesda  CITY A  Disitory, etc.  BB&T  1909 K St., NW	MD	20814   _
Name of Bank, Depo	Pository, etc.  Wachovia  7901 Wisconsin Ave.  Bethesda  CITY A  Disitory, etc.  BB&T  1909 K St., NW	MD	20814   _

Banks or Other Depositories: safety deposit boxes or maintain	List all banks or other depositories in which the committee of stunds	deposits funds, hol	lds accounts, rents
Name of Bank, Depository, etc.	o rundo.		[ ADDITIONAL ]
Chain B	ridge Bank		
Mailing Address	1445-A Laughlin Ave.		
ag / taal ooo	1		
	Moleon		22101
	McLean		
	CITY 🗖	STATE	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Joint Fundraising Represe	entative, or Leade	[ ADDITIONAL ]
Mailing Address			
		LL L	
Relationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraising Represe	entative Lea	adership PAC Sponsor
Designated Agent			[ ADDITIONAL ]
Full Name		<u> </u>	
Mailing Address			
Title or Position ▼	CITY A	STATE <b> ∆</b>	ZIP CODE A
	Telephone r	number	
Joint Fundraiser Participant			[ ADDITIONAL ]
		o number C	