STATEMENT OF

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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. NRCC 320 FIRST STREET SE ADDRESS (number and street) (Check if address is changed) WASHINGTON 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kdavis@hdafec.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.nrcc.org (Check if address is changed) DATE 2020 C00075820 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. Davis, Keith A., , , Type or Print Name of Treasurer Davis, Keith A.,,, [Electronically Filed] 12 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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 Only Local 202-694-1100

FEC	Form 1 (Revised 02/2009)	Page 2
TYPE OF	COMMITTEE ate 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. (Cominformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affi		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	ommittee:	(Dama ayatia
(d)	This committee is a NAT (National, State or subordinate) committee of the REP	(Democratic, Republican, etc.) Party.
Politica	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a
	Corporation Wo Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	egregated 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.)	
Joint Fu	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
C	ommittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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FEC Form 1 (Revis		Page 3
Write or Type Committee N	lame	
NRCC		
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
COLE COMBINED	COMMITTEE	
Mailing Address	12176 CHANCERY STATION CIRCLE	
	RESTON	20190
	CITY STATE	ZIP CODE
	Affiliated Committee Joint Fundraising Representa	
	To the A	
Full Name	Keith A., , ,	
Mailing Address	320 First Street SE	
	Washington	20003
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	202 429 - 7000
3. Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; g., assistant treasurer).	and the name and address of
Full Name Davis, of Treasurer	Keith A., , ,	
Mailing Address	320 First Street SE	
	Washington DC CITY STATE	20003 ZIP CODE
Title or Position Treasurer		202 - 429 - 7000

FEC Form 1 (Revised	d 02/2009)		Page 4
Full Name of Designated Agent Jentgens,	Rob, , ,		
Mailing Address	320 First Street SE		
	Washington	DC 20003 STATE	ZIP CODE
Title or Position Assistant Treasurer		umber	429 - 7000
safety deposit boxes or mair Name of Bank, Depository, o	etc.	ittee deposits funds, holc	ds accounts, rents
Wells F	argo 1753 Pinnacle Drive		
Mailing Address			
	McLean	VA 22102	
	CITY	STATE	ZIP CODE
Name of Bank, Depository, 6	etc.		
BB&T Mailing Address	1909 K Street NW		
	Washington	DC 20006	
	CITY	STATE	ZIP CODE

FEC Form 1S (Revised 02/2017)

5(g) o	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
6.	Name of Any Connected PRICE FREEDON	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	2814 SPRING ROAD STE 210		
		ATLANTA	, GA	30339
	Relationship:	CITY A	STATE A	ZIP CODE ▲
			indraising Representa	
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telep	phone Number	
	Banks or Other Depositor	ries: List all banks or other depositories in which the	committee denosit	- for de le lele
	safety deposit boxes or ma			s runds, noids accounts, rents
	Name of Bank, Chain Depository, etc.	intains funds.		s runas, noias accounts, rents
	safety deposit boxes or ma	uintains funds. Bridge Bank		s runas, noias accounts, rents
	Name of Bank, Chain Depository, etc.	uintains funds. Bridge Bank		s runas, noias accounts, rents
	Name of Bank, Chain Depository, etc.	uintains funds. Bridge Bank	VA	zerounts, noids accounts, rents

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). Joint Fundraisin g	յ Participant։		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraisi	ng Representative	e, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON STREET SUITE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	ndraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
			OTATE A	7ID 00DE 4
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	*	STATE ▲	ZIP CODE 🛦
9.	Banks or Other Depositorisafety deposit boxes or mai	Telepl ies: List all banks or other depositories in which the	hone Number	
9.	Banks or Other Depositorisafety deposit boxes or mai	Telephanteries: List all banks or other depositories in which the ntains funds.	hone Number	
9.	Banks or Other Depositorisafety deposit boxes or main Name of Bank, Depository, etc.	Telephologies: List all banks or other depositories in which the ntains funds.	hone Number	
9.	Banks or Other Depositorisafety deposit boxes or main Name of Bank, Depository, etc.	Telephologies: List all banks or other depositories in which the ntains funds.	hone Number	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.	 	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Funda	raising Representative	, or Leadership PAC Sponsor
	CONAWAY MAJO	ORITY FUND		
		110 W LOUISIANA AVE SUITE 312		
	Mailing Address			
		MIDLAND	TX	79701
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
8. 9.	Full Name Mailing Address TITLE OR POSITION	CITY A ries: List all banks or other depositories in which	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Bank of Bank, Ban	CITY A ries: List all banks or other depositories in which	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail	CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Te ries: List all banks or other depositories in which aintains funds. of Santa Clarita	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Te ries: List all banks or other depositories in which aintains funds. of Santa Clarita	STATE A	

FEC Form 1S (Revised 02/2017)

g) or (h). Joint Fund	Iraising Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	ected Organization, Affiliated Committee, Joint Fo	undraising Representativ	re, or Leadership PAC Sponsor
Mailing Addres	s 120 NORTH CONGRESS STREET STE 300		
	POST OFFICE BOX 80		
	JACKSON	MS	39205
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Con	nnected Organization Affiliated Committee	Joint Fundraising Represent	tative Leadership PAC Sponso
Designated Agent: Full Name	dentify by name, address (phone number – optiona	,, 	
Mailing Address			
Mailing Address			
Mailing Address			
Mailing Address TITLE OR POS	CITY A	STATE A	ZIP CODE A
	CITY A		
TITLE OR POS Banks or Other De safety deposit boxes	ITION ▼ CITY ▲ cositories: List all banks or other depositories in where the state of the sta	STATE ▲ Telephone Number	ZIP CODE A
Banks or Other Desafety deposit boxes Name of Bank, Depository, etc.	Oositories: List all banks or other depositories in whor maintains funds. ank of North Georgia ⊌8025 Westside Parkway	STATE ▲ Telephone Number	ZIP CODE 🛦
Banks or Other Desafety deposit boxes	Oositories: List all banks or other depositories in whor maintains funds. ank of North Georgia ⊌8025 Westside Parkway	STATE ▲ Telephone Number	ZIP CODE 🛦
Banks or Other Desafety deposit boxes Name of Bank, Depository, etc.	Oositories: List all banks or other depositories in whor maintains funds. ank of North Georgia ⊌8025 Westside Parkway	STATE ▲ Telephone Number	ZIP CODE 🛦

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

h). Joint Fundraisin	g Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
ROSKAM VICTOR	RY COMMITTEE; THE		
Martin Adding	610 S BOULEVARD		
Mailing Address			
	TAMPA	<u> </u>	22606
	TAMPA	FL	33606
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization	Fundraising Representa	ative Leadership PAC S
Connected		Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify		Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
7-			
Name of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Sponsor
DENHAM VICTOR	RY FUND		
Mailing Address	2150 RIVER PLAZA DR #150		
	SACRAMENTO	CA L	95833
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sponsor
Full Name			
Mailing Address			
	1		I I-I
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
		Telephone Number	
Banks or Other Depositor	ies: List all banks or other depositories in which	ch the committee deposit	s funds, holds accounts, rents
safety deposit boxes or ma	intains funds.		
Name of Bank, Suntrus	st		
Mailing Address	P.O. Box 4418		1 1 1 1 1 1 1
		<u> </u>	<u> </u>
	Atlanta	GA	30302
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

r(h). Joint Fundraisir	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponso
VVOIVIACK IVIAJO	KITT FUND		
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	, , VA ,	22314
Delete edite			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Full Name	y by name, address (phone number – optional)		1 1 1 1 1 1 1 1 1 1
Mailing Address			
	CITY	STATE A	ZIR CODE A
TITLE OR POSITION	CITY ▲	STATE A	ZIP CODE A
TITLE OR POSITION			ZIP CODE A
Banks or Other Deposito safety deposit boxes or ma	pries: List all banks or other depositories in whice aintains funds. all City Bank	STATE ▲ Telephone Number	
Banks or Other Deposito safety deposit boxes or ma	pries: List all banks or other depositories in whice aintains funds.	STATE ▲ Telephone Number	
Banks or Other Depositors afety deposit boxes or management of Bank, Depository, etc.	pries: List all banks or other depositories in whice aintains funds. Pal City Bank 1900 E Ninth Street	STATE A Telephone Number th the committee deposit	s funds, holds accounts, rents
Banks or Other Depositors afety deposit boxes or management of Bank, Depository, etc.	pries: List all banks or other depositories in whice aintains funds. all City Bank	STATE ▲ Telephone Number	

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). Joint Fundraisi n	ng 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	Organization, Affiliated Committee, Joint Funda	aising Representativ	ve, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint	Fundraising Represen	tative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
	Mailing Address			
	3			
		1	1 1 . 1	1
	TITLE OR POSITION	CITY ▲	STATE A	ZIP CODE ▲
	TITLE OR POSITION	. ▼		
9.	Banks or Other Deposito safety deposit boxes or ma	Te	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisi n	g Participant:			
	1		FEC I	D number	C
	2.		FEC I	D number	C
	3.		FEC I	D number	C
	4.		FEC I	D number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Re	epresentative	e, or Leadership PAC Sponsor
	Mailing Address	2470 DANIELLS BRIDGE RD STE 121			
		ATHENS	1	GA	30606
	Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	✗ Joint Fundraisir	ng Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	/ by name, address (phone number – optio	nal)		
	Full Name				
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲		STATE A	ZIP CODE ▲
			Telephone I	Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in aintains funds.	which the comm	nittee deposit	s funds, holds accounts, rents
		31531 Santa Margarita Parkway			
	Mailing Address				
		Pancha Santa Marga		- 64	.03699
		Rancho Santa Marga		CA	92688
ı		CITY A		STATE ▲	ZIP CODE ▲

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

h). Joint Fundraising	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 (Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spor
IOWA CONGRES	SIONAL MAJORITY FUND; THE		
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected		Fundraising Representa	Leadership PAC S
	by name, address (phone number – optional)	Fundraising Represent	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadersnip PAC S
esignated Agent: Identify Full Name		Fundraising Representation	Leadersnip PAC S
esignated Agent: Identify Full Name			Leadersnip PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail ame of Bank, Communication, etc.	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which ntains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which ntains funds. unity Bank of Mississippi	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail ame of Bank, Communication, etc.	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which ntains funds. unity Bank of Mississippi	STATE A	ZIP CODE A

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

h). Joint Fundraisi n			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
BRADY VICTOR			
Mailing Address	8505 TECHNOLOGY FOREST PLACE		
. J	SUITE 702		
	THE WOODLANDS	TX	77381
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identify		Fundraising Representation	Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail ame of Bank, epository, etc. First C	ries: List all banks or other depositories in which aintains funds. apital Bank of Texas 310 West Wall Street	STATE A	ZIP CODE A

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

h). Joint Fundraisin	g Participant:			
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
7.				
ame of Any Connected	Organization, Affiliated Committee, J	loint Fundraisi	ng Representativ	e, or Leadership PAC Spons
WALDEN VICTOR	RY FUND			
Mailing Address	228 S WASHINGTON ST STE 115			
		1 1 1 1 1		
			VA	22314
	ALEXANDRIA			
Relationship:			STATE A	ZIP CODE ▲
	ALEXANDRIA CITY GOrganization Affiliated Committee To by name, address (phone number –		STATE ▲ draising Represent	ZIP CODE tative Leadership PAC Specialist
Connected	CITY ▲ I Organization Affiliated Committee			
Connected esignated Agent: Identify	CITY ▲ I Organization Affiliated Committee			
esignated Agent: Identify Full Name	CITY ▲ I Organization Affiliated Committee			
esignated Agent: Identify Full Name	CITY ▲ I Organization Affiliated Committee			
esignated Agent: Identify Full Name	CITY A d Organization Affiliated Committee by by name, address (phone number –			Leadership PAC Spanish
esignated Agent: Identify Full Name Mailing Address	CITY A d Organization Affiliated Committee by by name, address (phone number –	optional)	draising Represent	Leadership PAC Sport

FEC Form 1S (Revised 02/2017)

ō(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
	ame of Any Connected (Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
L				
L				
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115	I	1 1 1 1 1 1 1 <u>1 1 1 1 1 1 1 1 1 1 1 1 </u>
		ALEXANDRIA	VA I	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	undraising Representa	ative Leadership PAC Sponsor
. De	Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OF POSITION	CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	▼	SIAIE	ZII OODL 🛋
	TITLE OR POSITION	•	phone Number	
saf Na	anks or Other Depositor fety deposit boxes or main many arms of Bank, Forcht	Teleprines: List all banks or other depositories in which the intains funds.	phone Number	
saf Na	anks or Other Depositor fety deposit boxes or mai ame of Bank, epository, etc.	Teleprines: List all banks or other depositories in which the intains funds.	phone Number	
saf Na	anks or Other Depositor fety deposit boxes or main many arms of Bank, Forcht	Teleprites: List all banks or other depositories in which the intains funds. Bank	phone Number	
saf Na	anks or Other Depositor fety deposit boxes or mai ame of Bank, epository, etc.	ries: List all banks or other depositories in which the intains funds. Bank 2404 Sir Barton Way	phone Numbere committee deposit	s funds, holds accounts, rents
saf Na	anks or Other Depositor fety deposit boxes or mai ame of Bank, epository, etc.	Teleprites: List all banks or other depositories in which the intains funds. Bank	phone Number	

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

(h). Joint Fundraisi r	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
NUNES VICTOR	Organization, Affiliated Committee, Joint Fund Y FUND	draising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 6545		
	VICALIA	24	, 93290
	VISALIA	L CA	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joi	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	ative Leadership PAC Spo
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Spo
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Spo
resignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Spo
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depository, etc.	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which aintains funds. rgan Chase Bank, NA	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). Joint Fundraisi r	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	NRSC/NRCC VIC	CTORY COMMITTEE		
		228 S WASHINGTON STREET #115		
	Mailing Address			
		ALEXANDRIA	L VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
8.	Designated Agent: Identify	y by name, address (phone number – optional)		
8.	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	
8.	Full Name Mailing Address TITLE OR POSITION	CITY CITY Te ries: List all banks or other depositories in which taintains funds. 1St 919 East Main Street	the committee deposit	ZIP CODE S funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Te ries: List all banks or other depositories in which taintains funds.	lephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
HUDSON FREEI	OOM FUND		
	228 S WASHINGTON ST STE 115		
Mailing Address			
	ALEXANDRIA		20244
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
		t Fundraising Hepresent	Leadersnip PAC St
esignated Agent: Identi		t Fundraising Hepresent	Leadersnip PAC Sp
esignated Agent: Identi		t Fundraising Hepresent	Leadersnip PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadersnip PAC Sp
esignated Agent: Identi	by by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identing Full Name	by by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name Mailing Address TITLE OR POSITION	cy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the position of th	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and pank, River	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds. Valley Bank	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the position of th	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	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.	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds. Valley Bank	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds. Valley Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	ng Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	PITTENGER VIC	TORY FUND; THE		
	Mailing Address	PO BOX 9891		
		ARLINGTON	, , VA	22219
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		1	elephone Number	
9.				
	safety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	the committee deposits	s funds, holds accounts, rents
	safety deposit boxes or ma	aintains funds. Third Bank	the committee deposits	s funds, holds accounts, rents
	safety deposit boxes or ma	aintains funds.	the committee deposits	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	intains funds. Third Bank 1701 Boy Scout Road		
	Name of Bank, Depository, etc.	aintains funds. Third Bank	the committee deposits	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

(g) or ((h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
. N	Name of Any Connected HOLDING VICTO	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 97275		
		I , , <u>, , , , , , , , , , , , , , , , ,</u>		
		RALEIGH	NC	27624
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
_ D	esignated Agent: Identify	/ hv name. address (phone number – optional)		
_ . D	Full Name	y by name, address (phone number – optional)		
_ . D		y by name, address (phone number – optional)		
— . D	Full Name	y by name, address (phone number – optional)		
_ _ D	Full Name			
_ D	Full Name	CITY	STATE A	ZIP CODE A
_ 	Full Name	CITY A		
— В sa	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tele Tries: List all banks or other depositories in which the aintains funds.	STATE ▲ ephone Number	ZIP CODE 🛦
 . B sa	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or mail ame of Bank, Capito Depository, etc.	CITY CITY Tele Tries: List all banks or other depositories in which the aintains funds. If One 1200 F Street NW	STATE A ephone Number ne committee deposit	ZIP CODE ZIP CODE s funds, holds accounts, rents

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

Page $\underline{^{23}}$ of $\underline{^{206}}$

(h). Joint Fundraisi r		FEC ID number	С
1.		FEC ID number	C
2.			
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
MIMI WALTERS	VICTORY FUND		
Mailing Address	38 EXECUTIVE PARK SUITE 390		
	IRVINE	CA	92614
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mailing are of Bank, Towned	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mailing ame of Bank, Towned	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Depositor defety deposit boxes or mail depository, etc.	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Depositor defety deposit boxes or mail depository, etc.	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi n	ig Participant:		
1.	<u> </u>	FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
STIVERS VICTO	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		Fundraising Represent	ative Leadership PAC Sp
Connected Pesignated Agent: Identify	d Organization Affiliated Committee		ative Leadership PAC Sp
Connected Connec	d Organization Affiliated Committee		ative Leadership PAC Sp
Connected Pesignated Agent: Identify	d Organization Affiliated Committee		ative Leadership PAC Sp
Connected Pesignated Agent: Identify	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sp
Connected Pesignated Agent: Identify	Affiliated Committee Joint Ty by name, address (phone number – optional)	Fundraising Represent	
resignated Agent: Identify Full Name Mailing Address	Affiliated Committee y Joint y by name, address (phone number – optional) CITY	Fundraising Represent	
resignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Janks or Other Deposito afety deposit boxes or ma	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which to	Fundraising Represent	ZIP CODE A
resignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Fanks or Other Depositor afety deposit boxes or mail lame of Bank, Pirst Sidepository, etc.	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Tel pries: List all banks or other depositories in which taintains funds.	Fundraising Represent	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraising	ı 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 Fundraid	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	228 S WASHINGTON STREET STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	undraising Representa	ative Leadership PAC Spons
Full Name	by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	CITY ▲	STATE A	
LILE ON POSITION	1	phone Number	
safety deposit boxes or mai	ies: List all banks or other depositories in which the ntains funds. Dommunity Credit Union 3030 S. Adrian Highway	e committee deposit	s funds, holds accounts, rents
	Adrian	MI	49221
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

SCALISE LEADERS Mailing Address Relationship: Connected On	ganization, Affiliate SHIP FUND PO BOX 9891 ARLINGTON	ed Committee, Jo	pint Fundra		number number number	22219	Spon
3. 4. SCALISE LEADERS Mailing Address Relationship: Connected On	ganization, Affiliate SHIP FUND PO BOX 9891 ARLINGTON	ed Committee, Jo		FEC ID FEC ID	number	e, or Leadership PAC	Spon
4. SCALISE LEADERS Mailing Address Relationship: Connected On	ganization, Affiliate SHIP FUND PO BOX 9891 ARLINGTON	ed Committee, Jo		ising Repr	esentativ	e, or Leadership PAC	Spon
ame of Any Connected Org SCALISE LEADERS Mailing Address Relationship: Connected Org	ganization, Affiliate SHIP FUND PO BOX 9891 ARLINGTON	ed Committee, Jo		ising Repr	esentativ	e, or Leadership PAC	Spon
ame of Any Connected Org SCALISE LEADERS Mailing Address Relationship: Connected Org	PO BOX 9891 ARLINGTON	CITY A			VA	22219	Spon
SCALISE LEADERS Mailing Address Relationship: Connected On	PO BOX 9891 ARLINGTON	CITY A			VA	22219	C Spon
Mailing Address Relationship: Connected On	PO BOX 9891 ARLINGTON						
Mailing Address Relationship: Connected On	ARLINGTON						
Mailing Address	ARLINGTON						
Mailing Address	ARLINGTON						
Connected On							
Connected Or							
Connected Or	rganization Affi				STATE A		
Connected Or	rganization Affi					ZIP COD	DE 🔺
esignated Agent. Identity by	y name, address (p	hone number – o	ptional)				
Full Name							
Mailing Address							
L							
					1 , 1	1	
TITLE OF POSITION W		CITY A		S	TATE A	ZIP CODE	=
TITLE OR POSITION ▼		, , , , , , , 1	Tel	ephone Nu	mher	- -	. , ,
			1010	ephone ivu			
epository, etc.			in which th	ne committe	ee deposit	ts funds, holds accour	nts, ren
L							
,	Shirley			1	NY	11967	Ι

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

(h). Joint Fundraisi r	g Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
Mailing Address	2470 DANIELLS BRIDGE RD STE 121		
	ATHENS	GA L	30606
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		Fundraising Represent	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
Connecte Connecte Connecte		Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identif		Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identif		Fundraising Representation	Leadership PAC Spo
Connecte Designated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identif	y by name, address (phone number – optional) CITY		
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or mail	y by name, address (phone number – optional) CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite to the safety deposit boxes or mail to the safety deposit b	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraising	Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
	Mailing Address	2470 DANIELLS BRIDGE ROAD		
		SUITE 121		
		ATHENS	GA	30606
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	indraising Representa	tive Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
8.	Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name			710 0005 t
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or main	CITY CITY Telep Tes: List all banks or other depositories in which the	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or main Name of Bank, Depository, etc.	CITY CITY Teleptines: List all banks or other depositories in which the intains funds.	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositori safety deposit boxes or main Name of Bank, First Cit	CITY CITY Teleptines: List all banks or other depositories in which the intains funds. tizens Bank	STATE A	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or main Name of Bank, Depository, etc.	CITY CITY Teleptines: List all banks or other depositories in which the intains funds. tizens Bank	STATE A	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisi n	ng Participant:			
	1		FEC	ID number	C
	2.		FEC	ID number	C
	3.		FEC	ID number	C
	4.		FEC	ID number	C
6.		Organization, Affiliated Committee, Joint	_	epresentative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 2381			
		OTTAWA		L IL	61350
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Joint Fundrais	ing Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	y by name, address (phone number - optio	nal)		
	Mailing Address		1 1 1 1 1		
				1 , 1	
	TITLE OR POSITION	U CITY ▲		STATE ▲	ZIP CODE ▲
	LILLE ON FOSITION		Telephone	Number	
9.	safety deposit boxes or ma	pries: List all banks or other depositories in aintains funds. nerce Bank 1000 Walnut	which the comm	mittee deposit	s funds, holds accounts, rents
		Kansas City		MO	64106
		CITY ▲		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

1.	g Participant:			
			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
ame of Any Connected	Organization, Affi	liated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spon
EMMER VICTOR	Y COMMITTE	E		
1				
Mailing Address	824 S. MILLEDG	SE AVENUE		
	SUITE 101			
	ATHENS		GA	30605
Relationship:		CITY A	STATE A	ZIP CODE ▲
	d Organization		oint Fundraising Represent	
Full Name				
Mailing Adduses				
Mailing Address				
Mailing Address				
Mailing Address				
Mailing Address TITLE OR POSITION		CITY A	STATE A	ZIP CODE A
			STATE Telephone Number	
			1	
TITLE OR POSITION	▼ ries: List all banks	CITY A	Telephone Number	
TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	ries: List all banks aintains funds.	CITY A	Telephone Number	ZIP CODE A
TITLE OR POSITION anks or Other Depositorafety deposit boxes or material deposition of Bank, Country	▼ ries: List all banks	CITY A	Telephone Number	ZIP CODE A
anks or Other Depositor defety deposit boxes or material deposit boxes or material depository, etc.	ries: List all banks aintains funds.	CITY A	Telephone Number	ZIP CODE A
TITLE OR POSITION anks or Other Depositorafety deposit boxes or material deposition of Bank, Country	ries: List all banks aintains funds.	CITY A	Telephone Number	ZIP CODE A
TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposit boxes or material depository, etc.	ries: List all banks aintains funds.	CITY A	Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	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 MULLIN VICTOR	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
Mailing Address	332 W. LEE HIGHWAY		
Ü	#303		
	WARRENTON	VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identif	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			
Full Name Mailing Address	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	1	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite dafety deposit boxes or mame of Bank, Bank	CITY A Te pries: List all banks or other depositories in which	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	CITY CITY Te pries: List all banks or other depositories in which aintains funds. of Tampa	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite dafety deposit boxes or mame of Bank, Bank	CITY CITY Te pries: List all banks or other depositories in which annuals funds.	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY CITY Te pries: List all banks or other depositories in which aintains funds. Of Tampa 601 Bayshore Boulevard	the committee deposit	zip code 🛦
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY CITY Te pries: List all banks or other depositories in which aintains funds. of Tampa	elephone 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	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 Fund	Iraising Representative	e, or Leadership PAC Spons
ROYCE VICTOR	Y FUND		
Mailing Address	228 S. WASHINGTON STREET		
3	SUITE 115		
	ALEXANDRIA	VA I	22314
Deletienelie		STATE ▲	ZIP CODE ▲
Relationship:	CITY A ed Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi			ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee	nt Fundraising Representa	
Connecte Designated Agent: Identi Full Name	Affiliated Committee Join My by name, address (phone number – optional)		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee	nt Fundraising Representa	
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite	Affiliated Committee	STATE A	ZIP CODE A
Connected Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or make the safety deposit boxes or	Affiliated Committee	STATE A	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 Affiliated Committee Join Ty by name, address (phone number – optional) CITY CITY CITY CITY Tories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Connected Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or make the safety deposit boxes or	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds. Merit Bank	STATE A	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 Affiliated Committee Fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds. Merit Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page $\underline{^{33}}$ of $\underline{^{206}}$

5(g) (or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected SMITH VICTORY	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S. MILLEDGE AVENUE		
		SUITE 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OF POSITION	_ CITY ▲	CTATE A	7ID 00DE 4
	TITLE OR POSITION	▼ OIII A	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	•	ephone Number	ZIP CODE ▲
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which thaintains funds. of Nevada	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which thaintains funds.	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which thaintains funds. of Nevada	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which thaintains funds. of Nevada	ephone Number	

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

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 Fundr	raising Representative	e, or Leadership PAC Spons
TEAM MCCAUL	VICTORY COMMITTEE		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, , , VA ,	22314
			ZIP CODE ▲
Relationship:	CITY ▲ d Organization Affiliated Committee ✓ Joint	STATE ▲ Fundraising Representa	
Connected			
esignated Agent: Identif	d Organization Affiliated Committee		
Connecter connec	d Organization Affiliated Committee		
esignated Agent: Identif	d Organization Affiliated Committee		Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Joint by by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Joint by by name, address (phone number – optional) CITY		Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

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5(g) c	or(h). Joint Fundraisin	g Participant:		
	1.	F	FEC ID number	С
	2.	F	FEC ID number	C
	3.	F	FEC ID number	C
	4	F	FEC ID number	C
6.	Name of Any Connected WALBERG VICTO	Organization, Affiliated Committee, Joint Fundraisin	ng Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 1362		
		JACKSON		49204
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	ndraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Teleph	none Number	
9.				
ð.	safety deposit boxes or many Name of Bank, First N	ries: List all banks or other depositories in which the aintains funds. ational Bank	committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	aintains funds.	committee deposit	s funds, holds accounts, rents
9 .	safety deposit boxes or many Name of Bank, First N	ational Bank	committee deposit	s funds, holds accounts, rents
9 .	Name of Bank, Depository, etc.	ational Bank 3015 Glimcher Boulevard		
9.	Name of Bank, Depository, etc.	ational Bank	committee deposit	s funds, holds accounts, rents 16148 ZIP CODE

FEC Form 1S (Revised 02/2017)

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5(g) c	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
6.	Name of Any Connected BOST VICTORY	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S. MILLEDGE AVENUE		
		SUITE 101	, GA	30605
	Relationship:	CITY A	STATE A	ZIP CODE ▲
			ındraising Representa	
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		*		
		ı	phone Number	
	safety deposit boxes or ma	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
	safety deposit boxes or ma	ries: List all banks or other depositories in which the aintains funds. erity Bank		s funds, holds accounts, rents
	safety deposit boxes or ma	ries: List all banks or other depositories in which the aintains funds.		s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds. erity Bank		s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds. erity Bank		s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

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h). Joint Fundraisir	ig 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 Fundr	aising Representative	e, or Leadership PAC Spon
KATKO VICTOR			
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		Fundraising Representa	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representation	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee y Joint y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and ma	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material boxes or material forms and the composition of Bank, epository, etc.	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds. unties Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(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 Fu	ndraising Representative	e, or Leadership PAC Spons
ZELDIN VICTOR	Y COMMITTEE 2020		
Mailing Address	47 FLINTLOCK DRIVE		
	SHIRLEY	NY	11967
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Spo
Full Name			
Full Name			
Mailing Address	CITY A	STATE A	ZIP CODE A
	CITY A	STATE Telephone Number	
Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or many series.	CITY ▲ pries: List all banks or other depositories in whaintains funds. t Bank 2700 Cahaba Village Plaza	Telephone Number	ZIP CODE s funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the safety	CITY ▲ pries: List all banks or other depositories in whaintains funds. t Bank	Telephone Number	ZIP CODE A

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(h). Joint Fundraisin	g Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
		FEC ID number	С
4.			
	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spons
HUIZENGA VICTO	ORY FUND		
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	P.O. Box 2485		
Mailing Address	F.U. DUX 2403		
	Springfield	VA VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
Pesignated Agent: Identify		Fundraising Represent	ative Leadership PAC Sp
Designated Agent: Identify		Fundraising Represent	ative Leadership PAC Sp
Pesignated Agent: Identify		Fundraising Represent	ative Leadership PAC Sp
Pesignated Agent: Identify		Fundraising Represent	ative Leadership PAC Sp
Pesignated Agent: Identify	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
Pesignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
Pesignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
Pesignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Tel ries: List all banks or other depositories in which t	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY Tel ries: List all banks or other depositories in which taintains funds.	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY Tel ries: List all banks or other depositories in which t	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mailane of Bank, Frankli	y by name, address (phone number – optional) CITY CITY Tel ries: List all banks or other depositories in which taintains funds.	STATE A lephone Number	ZIP CODE A
Full Name	y by name, address (phone number – optional) CITY CITY Tel ries: List all banks or other depositories in which taintains funds. in Synergy Bank	STATE A lephone Number	ZIP CODE A
Full Name	y by name, address (phone number – optional) CITY CITY Tel ries: List all banks or other depositories in which taintains funds. in Synergy Bank	STATE A lephone Number	ZIP CODE A

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

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(h). Joint Fundraisin	g 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 Fund RESSIONAL TRUST	draising Representativ	e, or Leadership PAC Spons
Mailing Address	P.O. Box 701		
	Clayton	NC NC	27528
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		nt Fundraising Represent	ative Leadership PAC Spo
Connected	Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connected Connected Connected Connected Connected	Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connected Connected Designated Agent: Identify Full Name	Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connected Connected Designated Agent: Identify Full Name	Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connected Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Join by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee by name, address (phone number – optional) CITY CITY		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which intains funds.	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or mail and the compository, etc. Eagle Connected Connected	Affiliated Committee by name, address (phone number – optional) CITY CITY CITY Sies: List all banks or other depositories in which intains funds. Bank	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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n). Joint Fundraisi r	g Participant:		
1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spor
RODNEY DAVIS	VICTORY FUND		
Mailing Address	P.O. Box 9891		
	Arlington	VA VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC S
	d Organization Affiliated Committee Jo	int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		int Fundraising Represent	Leadership PAC S
esignated Agent: Identif			Leadership PAC S
esignated Agent: Identification Full Name Mailing Address	by name, address (phone number – optional)		
esignated Agent: Identif	by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or ma	ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank, Chemicapository, etc.	ries: List all banks or other depositories in which sintains 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	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
DAVD YOUNG V	ICTORY FUND		
Mailing Address	P.O. Box 225		
	Van Meter		50261
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
	fy by name, address (phone number – optional)		Leadership The S
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi	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 mame of Bank, First F	fy by name, address (phone number – optional) CITY CITY Te	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, First F	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which paintains funds. Financial Bank	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, First F	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which laintains funds.	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	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which paintains funds. Financial Bank	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	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which paintains funds. Financial Bank	STATE A	ZIP CODE A

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(h). Joint Fundraisi			0
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Mailing Address	22780 Indian Creek Drive Suite 100		
	Dulles	VA VA	20166
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi			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) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, Zions	fy by name, address (phone number – optional) CITY CITY Te Dries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and provided the second control of the se	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. Bank	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and provided the second control of the se	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:			
	1.		FEC II	D number	С
	2.		FEC II	D number	С
	3.		FEC II	D number	C
	4.		FEC II	D number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising Re	presentative	e, or Leadership PAC Sponsor
	Mailing Address	2345 GRAND BLVD SUITE 2400			
		KANSAS CITY		MO	64108
	Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Joint Fundraisin	g Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optiona	ul)	1 1 1 1	
	Mailing Address				
		1			
	TITLE OR POSITION	CITY A		STATE ▲	ZIP CODE ▲
			Telephone N	lumber	
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.		hich the comm	ittee deposit	s funds, holds accounts, rents
	Mailing Address	1801 W. Grand River			
		Okemos		MI	48864
ı		CITY ▲		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(a) (or(h). Joint Fundraisin	α Participant:		
(9)	1.	<u>, , , , , , , , , , , , , , , , , , , </u>	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4		T EO 15 Hamber	0
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	LOVE VIOTORIT			
	Mailing Address	824 S MILLEDGE AVENUE		
		SUITE 101		
		ATHENS	, GA	30605
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	Mailing Address			
	Mailing Address			
			STATE A	ZIP CODE A
	Mailing Address TITLE OR POSITION	•	STATE ▲ lephone Number	ZIP CODE A
		•		ZIP CODE A
9.	TITLE OR POSITION	ries: List all banks or other depositories in which	lephone Number	
9.	TITLE OR POSITION Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which	lephone Number	
9.	Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which taintains funds.	lephone Number	
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which taintains funds.	lephone Number	
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which taintains funds.	lephone Number	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisir	ng Participant:				
1.			FEC I	D number	С
2.			FEC I	D number	C
3.			FEC I	D number	C
4.			_ FEC I	D number	C
lame of Any Connected	Organization, Affilia	ted Committee, Joint F	undraising Re	presentativ	e, or Leadership PAC Spon
MARINO VICTOR	RY FUND			1 1 1 1	
Mailing Address	PO BOX 26141				
	ALEXANDRIA			VA	22313
Relationship:		CITY A		STATE A	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number – optiona	al)		
Full Nome					
Full Name					
Full Name					
		CITY A		STATE A	ZIP CODE A
Mailing Address			Telephone N		
Mailing Address TITLE OR POSITION Line of the position of th	ories: List all banks or aintains funds. lational Bank of P.O. Box 848	CITY ▲ r other depositories in w		ittee deposit	ZIP CODE ZIP CODE s funds, holds accounts, rent
Mailing Address TITLE OR POSITION Ganks or Other Deposite afety deposit boxes or mail are of Bank, depository, etc.	ories: List all banks or aintains funds.	CITY ▲ r other depositories in w		lumber	ZIP CODE A

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

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1.	g Participant:		
		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
ROTHFUS VICTO	DRY COMMITTEE		
1			
Mailing Address	PO BOX 2485		
	SPRINGFIELD	, , , VA ,	22152
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	/ by name, address (phone number – optional)		
Full Name			
Mailing Address			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE A
TITLE OR POSITION	▼ CITY ▲	STATE ▲	
TITLE OR POSITION	▼ CITY ▲	1	
anks or Other Depositor	CITY ▲ Tries: List all banks or other depositories in which	elephone Number	ZIP CODE A
anks or Other Depositor	CITY ▲ Tries: List all banks or other depositories in which	elephone Number	ZIP CODE A
anks or Other Depositor	CITY ▲ Tries: List all banks or other depositories in which	elephone Number	ZIP CODE A
anks or Other Depositor afety deposit boxes or mark ame of Bank, epository, etc.	CITY ▲ ries: List all banks or other depositories in which aintains funds.	elephone Number	ZIP CODE A
eanks or Other Depositor	ries: List all banks or other depositories in which aintains funds. Gulf Bank	elephone Number	ZIP CODE A
anks or Other Depositor afety deposit boxes or markame of Bank, epository, etc.	ries: List all banks or other depositories in which aintains funds. Gulf Bank 900 Town & Country Lane	elephone Number	ZIP CODE A

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

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n). Joint Fundraising	Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected (Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spor
TURNER VICTOR	Y FUND		
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee Joi	int Fundraising Represent	ative Leadership PAC S
	Organization Affiliated Committee Joi	int Fundraising Represent	Leadership PAC S
esignated Agent: Identify		int Fundraising Represent	Leadership PAC S
esignated Agent: Identify Full Name		int Fundraising Represent	Leadership PAC S
esignated Agent: Identify Full Name			Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which ntains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai ame of Bank, First Ba	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which ntains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which intains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai ame of Bank, First Ba	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which intains 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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h). Joint Fundraisi	1	EEC ID words	C
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	I Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Spon
	UP VICTORY FUND		
Mailing Adduses	PO BOX 30844		
Mailing Address			
	BETHESDA	, MD,	20824
Dalatianahin			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
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	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management.	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which haintains funds.	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management.	fy by name, address (phone number – optional) CITY CITY Te	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, Indep	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which haintains funds.	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	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which paintains funds. endent Bank	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	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which paintains funds. endent Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisir	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
TEAM LAHOOD			
1			
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representation	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Solution Joint y by name, address (phone number – optional)	: Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	
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FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi		FEC ID number	C
2.		FEC ID number	C
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4.		FEC ID number	C
lame of Any Connected	d Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spons
ANDY BARR VIO	CTORY COMMITTEE		
Mailing Address	#303		
	WARRENTON	VA	20186
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
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Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the property of the propert	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which naintains funds. nce Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(a)	or(h). Joint Fundraisin	ng Particinant		
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	2.		FEC ID number	C
			FEC ID number	C
	3.			
	4.		FEC ID number	C
6.	Name of Any Connected WILSON LEADER	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 2456		
		SPRINGFIELD	, , VA	22152
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connector	d Organization	t Fundraising Representa	
		7 Grganization	Transfer Tepresent	Locadoromp 1710 Oponioor
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		CITY ▲	STATE A	
	TITLE OR POSITION	•		ZIP CODE A
	TITLE OR POSITION	•	STATE ▲	ZIP CODE A
9.	Banks or Other Deposito safety deposit boxes or ma	To pries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	pries: List all banks or other depositories in which aintains funds.	elephone Number	
9.	Banks or Other Deposito safety deposit boxes or ma	pries: List all banks or other depositories in which aintains funds.	elephone Number	
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	pries: List all banks or other depositories in which aintains funds.	elephone Number	
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	pries: List all banks or other depositories in which aintains funds.	elephone Number	

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

(h). Joint Fundrais	ing 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 TEAM GALLAGE	d Organization, Affiliated Committee, Joint Fui HER	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	1915 SOUTH WEBSTER AVE		
	STE D		
	GREEN BAY	wi j	54301
		STATE ▲	ZIP CODE ▲
		oint Fundraising Representa	ative Leadership PAC Spo
Connect			ative Leadership PAC Spo
Connect Connect Designated Agent: Ident	ed Organization Affiliated Committee		ative Leadership PAC Spo
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Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION	ed Organization	state Telephone Number	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

y) or (h). Joint Fundraisin	g Participant:		
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3.		FEC ID number	С
4.		FEC ID number	С
		□	
Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representati	ve, or Leadership PAC Sponsor
STRONG AMERI	CA FUND		
Mailing Address	824 S MILLEDGE AVE, STE 101		
	ATHENS	GA L	30605
Relationship:	CITY A	STATE 4	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Joint Fundraising Represer	tative Leadership PAC Sponsor
Full Name	by name, address (phone number – option		
Mailing Address			
	1		
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in value in the state of th	which the committee depos	its funds, holds accounts, rents
Mailing Address	P.O. Box 241489		
	Anchorage	AK	<u> </u> 99524
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

1		FEC ID number	C
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3.		FEC ID number	С
		FEC ID number	C
4.			
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	eising Representativ	or Leadership PAC Spons
=	ORY COMMITTEE	aloning inopias	5, 01 Loudoicing
··· • • • • • • • • • • • • • • • • •	PO BOX 9891		
Mailing Address			
			00040
	ARLINGTON	VA	22219
	CITY ▲ d Organization Affiliated Committee X Joint	STATE ▲ Fundraising Representa	ZIP CODE ▲
Connecte	CITY A	STATE ▲	ZIP CODE ▲
Connecte esignated Agent: Identif	CITY ▲ d Organization Affiliated Committee X Joint	STATE ▲	ZIP CODE ▲
Connecte esignated Agent: Identif	CITY ▲ d Organization Affiliated Committee X Joint	STATE ▲	ZIP CODE ▲
Connecte esignated Agent: Identif	CITY d Organization Affiliated Committee y by name, address (phone number – optional)	STATE ▲	ZIP CODE ative Leadership PAC Sp
Connecte esignated Agent: Identif Full Name Mailing Address	CITY A d Organization Affiliated Committee y by name, address (phone number – optional)	STATE ▲	ZIP CODE ▲
Connecte esignated Agent: Identif	CITY A d Organization Affiliated Committee y by name, address (phone number – optional) CITY A CITY A	STATE A Fundraising Representa	ZIP CODE A ative Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:			
	1		FEC	ID number	C
	2.		FEC	ID number	C
	3.		FEC	ID number	C
	4.		FEC	ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising R	epresentativ	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 1444			
		ENNIS		L TX	75120
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Joint Fundrais	ing Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – options	al)		
	Mailing Address				
			1	1 . 1	1
	TITLE OR POSITION	_ CITY ▲		STATE ▲	ZIP CODE ▲
	L		Telephone	Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in water intains funds. Ele Bank 4328 Harding Pike	hich the comm		s funds, holds accounts, rents
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1		CITY A		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

g) or (h).	Joint Fundraisin	g Participant:		
1	1		FEC ID number	C
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ę	3.		FEC ID number	C
	4.		FEC ID number	С
	ne of Any Connected	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
Ľ				
L				
	Mailing Address	610 S. BOULEVARD		
		TAMPA 	L FL	33606
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponso
Desi	ignated Agent: Identify	/ by name, address (phone number – optional)		
	ignated Agent: Identify	by name, address (phone number – optional)		
F		y by name, address (phone number – optional)		
F	Full Name _	by name, address (phone number – optional)		
F	Full Name _	by name, address (phone number – optional)		
F	Full Name	CITY	STATE A	ZIP CODE A
F	Full Name _	CITY A		
Banl safet	Full Name Mailing Address TITLE OR POSITION ks or Other Deposito ty deposit boxes or ma	CITY Tele ries: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
Banl safet	Full Name Mailing Address TITLE OR POSITION ks or Other Deposito ty deposit boxes or ma	CITY CITY Tele ries: List all banks or other depositories in which that a sintains funds.	STATE ▲	ZIP CODE A
Banl safet	Full Name Mailing Address TITLE OR POSITION ks or Other Deposito ty deposit boxes or maine of Bank, ository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the aintains funds. unties Bank	STATE ▲	ZIP CODE 🛦
Banl safet	Full Name Mailing Address TITLE OR POSITION ks or Other Deposito ty deposit boxes or maine of Bank, ository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the aintains funds. unties Bank	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisi	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 Fundrais		e, or Leadership PAC Sponsor
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	ındraising Representa	Leadership PAC Sponso
Designated Agent: Identify	by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	CITY ▲	STATE A	ZIP CODE A
TITLE OR POSITION	1	phone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in which the sintains funds. gton National Bank 41 S. High Street	e committee deposit	s funds, holds accounts, rents
	Columbus	OH	43215
	CITY A	STATE ▲	ZIP CODE ▲

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

(h). Joint Fundraisi	-3		
1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
KNIGHT VICTOR	Y FUND		
Mailing Address	P.O. BOX 730		
	HILMAR	CA	95324
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	cories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION ARRANGE OF Other Deposite afety deposit boxes or marks or Other Deposite afety deposite boxes or other Deposite afety deposite boxes or other Deposite afety d	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc. US Bareness	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page 60 of 206

(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
4.			
lame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
WALORSKI VICT	TORY FUND		
	P.O. POVOCAM		
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	, , , , , , VA ,	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	: Fundraising Hepresenta	Leadership PAC Sp
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esignated Agent: Identi		: Fundraising Hepresenta	Leadership PAC Sp
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Full Name Mailing Address TITLE OR POSITION Janks or Other Deposite afety deposit boxes or marked after the property of the position of Bank, are pository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds. Ilo National Bank	STATE A	ZIP CODE A

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

5(g) o	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected PALMER VICTOR	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	1919 OXMOOR ROAD		
		#223 HOMEWOOD	AL	35209
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected		undraising Represent	
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	phone Number	
	safety deposit boxes or ma		e committee deposit	s funds, holds accounts, rents
	safety deposit boxes or ma		e committee deposit	s funds, holds accounts, rents
	safety deposit boxes or many Name of Bank, Broady	aintains funds.	e committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	way Bank	e committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	way Bank	e committee deposit	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	REED VICTORY	COMMITTEE		
	Mailing Address	824 S. MILLEDGE AVENUE		
		SUITE 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
				<u> </u>
	TITI F OR POSITION	CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	•		
	TITLE OR POSITION	•	STATE A	
9.		ries: List all banks or other depositories in which	STATE A	ZIP CODE ▲
9.	Banks or Other Depositor	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE ▲
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE ▲
9.	Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{^{63}}$ of $\underline{^{206}}$

		FEC ID number	С
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lama of Any Composted (Organization, Affiliated Committee, Joint Fundr	raining Donyanantative	ar Landarshin DAC Coor
STEVE RUSSELL		aising nepresentative	s, or Leadership PAC Spon
Mailing Address	332 W. LEE HIGHWAY		1 1 1 1 1 1 1 1
	#303		
	WARRENTON	I VA I	20186
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	by name, address (phone number - optional)		
Full Name			
Full Name Mailing Address			
Mailing Address	CITY A	STATE A	ZIP CODE A
	•	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	▼ 	elephone Number	
Mailing Address TITLE OR POSITION	Tes: List all banks or other depositories in which	elephone Number	
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main arms of Bank,	Tes: List all banks or other depositories in which	elephone Number	
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Mailing Address TITLE OR POSITION Fanks or Other Depositor afety deposit boxes or mail are of Bank, depository, etc.	Tes: List all banks or other depositories in which	elephone Number	

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

h). Joint Fundraisi	ng Participant:		
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ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
ELISE VICTORY	FUND		
	D.O. DOV.500		
Mailing Address	P.O. BOX 500		
	GLENS FALLS	NY NY	12801
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng raiticipant.		
1.		FEC ID number	C
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3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
TEAM ESTES			
	2.0.200		
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Joint Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional) CITY	STATE A	
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To	STATE A	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 To	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
esignated Agent: Identi 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 To	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	fy by name, address (phone number – optional) CITY CITY To	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	fy by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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h). Joint Fundraising	i ai tioipaiit.					
1.				EC ID number		-
2.				EC ID number	C	
3.			[FEC ID number	C	
4.			F	FEC ID number	С	
ame of Any Connected (Committee, Joint	Fundraisii	ng Representati	ve, or Leadership PA	C Spon
TEAM MARSHALL						
Mailing Address	P.O. BOX 26141					
	ALEXANDRIA			VA	22313	- 💷
Relationship:		CITY A		STATE 4	ZIP CO	DF A
	Organization Affilia	ated Committee	¥ Joint Fun	draising Represer	ntative Leadership	
				draising Represer	ntative Leadership	
Connected esignated Agent: Identify				draising Represer	ntative Leadership	
Connected esignated Agent: Identify Full Name				draising Represer	ntative Leadership	
Connected esignated Agent: Identify Full Name		one number – optio	nal)		Leadership	PAC S
Connected esignated Agent: Identify Full Name Mailing Address	by name, address (pho	one number – optio	nal)			PAC S
Connected esignated Agent: Identify Full Name	by name, address (pho	one number – optio	nal)			PAC S
connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoriatety deposit boxes or mainame of Bank,	by name, address (pho	one number – optio	nal)	STATE A	ZIP COD	PAC S
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoring the deposit boxes or main the depository, etc.	by name, address (pho	one number – optio	nal)	STATE A	ZIP COD	PAC S
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Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoring the deposit boxes or main the depository, etc.	by name, address (pho	one number – optio	nal)	STATE A	ZIP COD	PAC S

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

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(h). Joint Fundraisi	ng Faiticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
FRIENDS OF AN	IDY BARR COMMITTEE		
	ı 332 W. LEE HIGHWAY		
Mailing Address			
	#303		
	WARRENTON	VA VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	st Fundraising Representation	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	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,	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	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,	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	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.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	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.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	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	C
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
MAST VICTORY	COMMITTEE		
Marilia a Aulaba a	824 S MILLEDGE AVE STE 101		
Mailing Address			
	ATHENS	, GA,	30605
Relationship:			
neialionsnip.	CITY A	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee Joint Joi	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee Affiliated Committee		
esignated Agent: Identif	Affiliated Committee Affiliated Committee	STATE A	
esignated Agent: Identification of the Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee Y Joint Market Committ	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification of the property of the propert	Affiliated Committee Y Joint Market Committ	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification of the Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee Y Joint Market Committ	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification of Bank,	Affiliated Committee Y Joint Market Committ	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee Y Joint Market Committ	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee Y Joint Market Committ	STATE A Telephone Number	ZIP CODE A

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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected WALKER FREEI	d Organization, Affiliated Committee, Joint Fur	draising Representativ	e, or Leadership PAC Spor
VVAERERTREEL			
Mailing Address	P.O. BOX 97275		
Walling / laarooo			
	Raleigh	, NC	27624
Deletionship			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC S
		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	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 ▲	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraising	Participant:		
	1	FEC	D ID number	С
	2.	FEC	C ID number	C
	3.	FEC	C ID number	С
	4	FEC	C ID number	C
6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising	Representativ	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 26141		
		ALEXANDRIA	J VA	22313
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fundrai	ising Represent	ative Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
8.	Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name			7ID CODE 4
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY Telephone ies: List all banks or other depositories in which the con	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Telephone ies: List all banks or other depositories in which the con	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY Telephone ies: List all banks or other depositories in which the con	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Telephone ies: List all banks or other depositories in which the con	STATE A	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Telephone ies: List all banks or other depositories in which the con	STATE A	

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). Joint Fundraisin g	Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	TEAM GAETZ			
	Mailing Address	610 S. BOULEVARD		
		TAMPA	, FL	33606
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
(0)	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 71596		
		RICHMOND	VA VA	23255
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
		1	1 1 1	
	TITLE OR POSITION	CITY ▲	STATE ▲	ZIP CODE A
	TITLE OR POSITION	•	STATE ▲ elephone Number	ZIP CODE ▲
9.		ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor	ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which	elephone Number	

FEC Form 1S (Revised 02/2017)

5(a)	or(h). Joint Fundraisin	g Participant:		
- (3)	1.	.	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Sponsor
	MIKE ROGERS V		3 4	,
	Mailing Address	2523 WILSON BOULEVARD		
	, and the second	#4		
		ARLINGTON	ı VA ı	, 22201
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
			Fundraising Representa	
	Connected	Allillated Committee	rundraising nepresenta	Leadership FAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A	1	ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name	CITY A	elephone Number	
	Full Name	CITY A Te ries: List all banks or other depositories in which	elephone Number	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY A Te ries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A Te ries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety depository, etc.	CITY A Te ries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety depository, etc.	CITY A Te ries: List all banks or other depositories in which	elephone Number	

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisin	g Participant:		
1	<u> </u>	FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
		FEC ID number	С
4			
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spor
TENNEY VICTOR	RY FUND		
	200 0 1/4 0 1/4 0 7 0 1 0 7		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	, , , , VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
П.	d Owner inskipe	sint Fundacioine Bonaccot	П
	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC S
			Leadership PAC S
esignated Agent: Identify			Leadership PAC S
esignated Agent: Identify			Leadership PAC S
esignated Agent: Identify			Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or ma	ries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or material depository, etc.	ries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address	ries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name	ries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page $\frac{75}{}$ of $\frac{206}{}$

5(g) d	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected ALLEN VICTORY	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 420521		
		ATLANTA	GA	30342
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Affiliated Committee	undraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
		CITY A	STATE A	ZIP CODE A
	Mailing Address	•		ZIP CODE A
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	Telepries: List all banks or other depositories in which the	STATE A	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main that the same of Bank, Depository, etc.	Telepries: List all banks or other depositories in which the	STATE A	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	Telepries: List all banks or other depositories in which the	STATE A	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main that the same of Bank, Depository, etc.	Telepries: List all banks or other depositories in which the	STATE A	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main that the same of Bank, Depository, etc.	Telepries: List all banks or other depositories in which the	STATE A	

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

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h). Joint Fundraising				1	FF0 15		C		
1.						number	=		=
2.						number	С		=
3.					FEC ID	number	С		_
4.					FEC ID	number	C		
ame of Any Connected C	organization, Affil	liated Commi	ittee, Join	t Fundrai	sing Rep	resentativ	e, or Le	eadership PAC	Spon
BUDD VICTORY									
Mailing Address	PO BOX 97275								
	RALEIGH					NC	2	7624	
Relationship:		CITY A	A			STATE A		ZIP CODE	= 🛦
Connected	Organization	Affiliated Com	nmittee		undraising	Represent	ative	Leadership F	
		Affiliated Com	nmittee		undraising	Represent	ative	Leadership F	
Connected esignated Agent: Identify		Affiliated Com	nmittee		undraising	Represent	ative	Leadership F	
Connected esignated Agent: Identify Full Name		Affiliated Com	nmittee		undraising	Represent	ative	Leadership F	
Connected esignated Agent: Identify Full Name		Affiliated Com	ber – optio	onal)		Represent		Leadership F	PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address	Affiliated Com	ber – optio	onal)		Represent			PAC S
Connected esignated Agent: Identify Full Name	by name, address	Affiliated Com	ber – optio	onal)		STATE A			PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address	Affiliated Comes (phone num	ber – optio	onal)	sphone Nu	STATE A		ZIP CODE	PAC S
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositorinatety deposit boxes or mainuame of Bank,	by name, address	Affiliated Comes (phone num	ber – optio	onal)	sphone Nu	STATE A		ZIP CODE	PAC S
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Tanks or Other Depositoring the pository of the pository, etc.	by name, address	Affiliated Comes (phone num	ber – optio	onal)	sphone Nu	STATE A		ZIP CODE	PAC S

FEC Form 1S (Revised 02/2017)

5(g) or ((h). Joint Fundraisin	g Participant:				
	1.			FI	EC ID number	C
	2.			FI	EC ID number	C
	3.			FI	EC ID number	C
_	4.			FI	EC ID number	С
5. N	Name of Any Connected	_		t Fundraisin	g Representative	e, or Leadership PAC Sponsor
	Mailing Address	5915 EASTMA	AN AVENUE SUITE 100			
		MIDLAND	· · · · <u>· · · · · · · · · · · · · · · </u>		MI	48640
	Relationship:		CITY A		STATE ▲	ZIP CODE ▲
	Connected	d Organization	Affiliated Committee	X Joint Fund	raising Represent	ative Leadership PAC Sponsor
3. D	Designated Agent: Identify	/ by name, addre	ess (phone number – opti	onal)		
	Full Name					
	Full Name L L L L L L L L L L L L L L L L L L L					
			CITY A		STATE A	ZIP CODE A
	Mailing Address					
s: N	Mailing Address TITLE OR POSITION Banks or Other Depositor lafety deposit boxes or mails and some of Bank,	▼ ries: List all bank	CITY A	Telepho	STATE A	
s: N	Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail afety deposit boxes or mail ame of Bank, Depository, etc.	▼ ries: List all bank	CITY A	Telepho	STATE A	ZIP CODE 🛦
s: N	Mailing Address TITLE OR POSITION Banks or Other Depositor lafety deposit boxes or mails and some of Bank,	▼ ries: List all bank	CITY A	Telepho	STATE A	ZIP CODE 🛦
s: N	Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail afety deposit boxes or mail ame of Bank, Depository, etc.	▼ ries: List all bank	CITY A	Telepho	STATE A	ZIP CODE 🛦
s: N	Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail afety deposit boxes or mail ame of Bank, Depository, etc.	▼ ries: List all bank	CITY A	Telepho	STATE A	ZIP CODE 🛦

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h). Joint Fundrais i	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 Fund	raising Representative	e, or Leadership PAC Spons
MACARTHUR-D	ONOVAN VICTORY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	, , MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Join	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident	Affiliated Committee Join Join ify by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Ative Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)		
esignated Agent: Ident	ify by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)		
Full Name Mailing Address	ify by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	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.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	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.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

n). Joint Fundraisin o	Participant:				
1.				C ID number	C
2.			FE	C ID number	С
3.			FE	C ID number	С
4.			FE0	C ID number	C
		Committee, Joint	Fundraising	Representativ	e, or Leadership PAC Spor
FERGUSON VICT	ORY FUND				
Mailing Address	P.O. BOX 420304				
	ATLANTA			_ GA	30342
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
				ising Represent	tative Leadership PAC S
Connected esignated Agent: Identify Full Name				aising Represent	Leadership PAC S
esignated Agent: Identify				ising Represent	Leadership PAC S
esignated Agent: Identify Full Name				ising Represent	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (pho		nal)		Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (pho	one number – option	nal)		
esignated Agent: Identify Full Name	by name, address (pho	one number – option	nal)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail	by name, address (pho	one number – option	Telephon	STATE A e Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	by name, address (pho	one number – option	Telephon	STATE A e Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail	by name, address (pho	one number – option	Telephon	STATE A e Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, address (pho	one number – option	Telephon	STATE A e Number	ZIP CODE A

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

h). Joint Fundraising						
1.				FEC ID numb		
2.				FEC ID numb	er C	
3.				FEC ID numb	er C	
4.				FEC ID numb	er C	
ame of Any Connected (=	ted Committee, J	oint Fundrai	sing Represent	ative, or	Leadership PAC Spor
MACARTHUR VIC	CIORY					
Mailing Address	PO BOX 9891					
	ARLINGTON			VA	<u> </u>	22219
Relationship:		CITY A		STATI		ZIP CODE ▲
	Organization Af	ffiliated Committee	X Joint F	Fundraising Repre	sentative	Leadership PAC S
				Fundraising Repre	sentative	Leadership PAC S
Connected esignated Agent: Identify				Fundraising Repre	sentative	Leadership PAC S
Connected esignated Agent: Identify Full Name				Fundraising Repre	sentative	Leadership PAC S
Connected esignated Agent: Identify Full Name	by name, address (p	phone number – d	optional)			
Connected esignated Agent: Identify Full Name	by name, address (p		optional)			Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (p	phone number – o	optional)			
esignated Agent: Identify Full Name Mailing Address	by name, address (p	city 🛦	optional)	STATE ephone Number		ZIP CODE A
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftety deposit boxes or main ame of Bank,	by name, address (p	city 🛦	optional)	STATE ephone Number		ZIP CODE A
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor ane of Bank, epository, etc.	by name, address (p	city 🛦	optional)	STATE ephone Number		ZIP CODE A

FEC Form 1S (Revised 02/2017)

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 C
	me of Any Connected C Feam Roby Victory	Organization, Affiliated Committee, Joint Fundraising Repr	resentative, or Leadership PAC Sponsor
L			
L			
	Mailing Address	824 S. MILLEDGE AVENUE	
		SUITE 101	
		ATHENS	GA 30605
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fundraising	Representative Leadership PAC Sponsor
	signated Agent: Identify Full Name	by name, address (phone number – optional)	
	Mailing Address		
	TITLE OR POSITION	▼ CITY ▲ S	STATE ▲ ZIP CODE ▲
		Telephone Nu	umber
safe Nan	nks or Other Depositoriety deposit boxes or mainme of Bank, pository, etc.	ies: List all banks or other depositories in which the committentains funds.	tee deposits funds, holds accounts, rents
safe Nan	me of Bank, pository, etc.	es: List all banks or other depositories in which the committentains funds.	tee deposits funds, holds accounts, rents
safe Nan	ety deposit boxes or main me of Bank,	es: List all banks or other depositories in which the committentains funds.	tee deposits funds, holds accounts, rents
safe Nan	me of Bank, pository, etc.	ies: List all banks or other depositories in which the committentains funds.	tee deposits funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

i(g) or i	(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
5. N	Name of Any Connected Davidson Victory	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	499 S. Capitol Street SW		
		Suite 407		
		Washington	DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
3. D	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
	Mailing Address			
	Mailing Address			
	Mailing Address			
	Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
		V		
s	TITLE OR POSITION Banks or Other Depositor cafety deposit boxes or many deposit boxes or many deposit boxes.	ries: List all banks or other depositories in which t	STATE ▲ Iephone Number	ZIP CODE 🛦
s	TITLE OR POSITION Banks or Other Depositor cafety deposit boxes or many deposit boxes or many depository, etc.	ries: List all banks or other depositories in which t	STATE ▲ Iephone Number	ZIP CODE 🛦
s	TITLE OR POSITION Banks or Other Depositor cafety deposit boxes or many deposit boxes or many deposit boxes.	ries: List all banks or other depositories in which t	STATE ▲ Iephone Number	ZIP CODE 🛦
s	TITLE OR POSITION Banks or Other Depositor cafety deposit boxes or many deposit boxes or many depository, etc.	ries: List all banks or other depositories in which t	STATE ▲ Iephone Number	ZIP CODE 🛦
s	TITLE OR POSITION Banks or Other Depositor cafety deposit boxes or many deposit boxes or many depository, etc.	ries: List all banks or other depositories in which t	STATE ▲ Iephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

5(a) o	r(h). Joint Fundraisin	n Particinant:				
J(g) U	1	y ranticipant.	1	FEC ID number	C	
	2.			FEC ID number	С	
				FEC ID number	С	
	3.					
	4			FEC ID number	C	
6.	Name of Any Connected	Organization, Affiliated Committee,	Joint Fundrai	sing Representative	e, or Leadership PAC S	ponsor
	Federalist Freedo	m Fund				1 1 1
	Mailing Address	824 S. MILLEDGE AVENUE				
		SUITE 101				1 1 1
		ATHENS		, GA	30605	
	Relationship:					•
		CITY ▲		STATE ▲	ZIP CODE	
	Connected	I Organization Affiliated Committee	e X Joint F	fundraising Representa	ative Leadership PA	C Sponsor
8.	Designated Agent: Identify	by name, address (phone number –	optional)			
	Full Name					1 1 1
	Mailing Address					
	Maining Address					
	Maining / Nacross					
	Walling Address				1	
		CITY A		STATE A	ZIP CODE 4	
	TITLE OR POSITION	CITY A		STATE A	ZIP CODE 4	
-		CITY A			ZIP CODE 4	
	TITLE OR POSITION	ries: List all banks or other depositori		ephone Number		
	TITLE OR POSITION Banks or Other Depositors afety deposit boxes or matching the safety deposit boxes or matching the safe	ries: List all banks or other depositori		ephone Number		
	TITLE OR POSITION Banks or Other Depositors afety deposit boxes or ma	ries: List all banks or other depositori		ephone Number		
	TITLE OR POSITION Banks or Other Depositor safety deposit boxes or material Name of Bank, Depository, etc.	ries: List all banks or other depositori		ephone Number		
	TITLE OR POSITION Banks or Other Depositor safety deposit boxes or material Name of Bank, Depository, etc.	ries: List all banks or other depositori		ephone Number		

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraising	p Participant:			
	1		FEC ID	number	C
	2.		FEC ID) number	C
	3	<u> </u>	FEC ID) number	C
	4		FEC ID) number	C
6.	Name of Any Connected (Smucker Victory C	Organization, Affiliated Committee, Join	t Fundraising Rep	presentative	e, or Leadership PAC Sponsor
	Mailing Address	824 S. MILLEDGE AVENUE			
		SUITE 101			
		ATHENS		GA _	30605
	Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	X Joint Fundraising	g Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optic	onal)		
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲	:	STATE A	ZIP CODE ▲
			Telephone N	umber	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank,	ies: List all banks or other depositories in ntains funds.	which the commit	ttee deposit	s funds, holds accounts, rents
	Depository, etc.				
	Mailing Address				
ı		CITY A	:	STATE A	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

1	g Participant:			
1.	<u> </u>		FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	С
4			FEC ID number	C
Name of Any Connected CRAMER VICTOR	=	d Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 26141			
	ALEXANDRIA		VA	22313
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
Connected	I Organization Affil	iated Committee	t Fundraising Representa	ative Leadership PAC Spon
Designated Agent: Identify	by name, address (ph	one number – optional)		
Full Name				
Full Name				
Mailing Address		CITY A	STATE A	ZIP CODE A
	▼			ZIP CODE A
Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank,	ries: List all banks or c		STATE ▲ elephone Number	ZIP CODE ZIP CODE s funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or c		STATE ▲ elephone Number	
Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank,	ries: List all banks or c		STATE ▲ elephone Number	
Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or c		STATE ▲ elephone Number	

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

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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
ame of Any Connected Chris Stewart Fre	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Chils Stewart Fre	;eaom rana 		
Mailing Address	610 S. BOULEVARD		
Mailing Address			
	TAMPA		33606
		FL	33606
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)	state A	Leadership PAC Sp
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	fy by name, address (phone number – optional) CITY T	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	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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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	3		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Culberson Victory	/ Committee		
Mailing Address	P.O. Box 41964		
	Houston		77241
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

h). Joint Fundraisi		FEC ID number	C
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Saccone Victory	Fund		
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	VA VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE	Leadership PAC S
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

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

h). Joint Fundraisi		FEC ID number	С
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		rec id fluifibei	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Protect the Hous	e		
Martin Address	P.O. Box 30844		
Mailing Address			
	Bethesda	, MD	20824
Deletionabie			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joint fy by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or markets.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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 Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
The Hawkeye Fu	nd 		
Mailing Address	824 S. MILLEDGE AVENUE		
-	SUITE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC Sp
	y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	Leadership PAC S
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	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.	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	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.	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). Joint Fundraisin	g Participant:			
	1.	1		FEC ID number	C
	2.	<u> </u>		FEC ID number	C
	3.	<u> </u>		FEC ID number	C
	4	<u> </u>		FEC ID number	C
6.		Organization, Affiliated Commi CTORY COMMITTEE	ttee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	THE ROSICAW VI	STORT CONNITTEE			
	Mailing Address	610 S. BOULEVARD			
		TAMPA		FL	33606
	Relationship:	CITY A	<u> </u>	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Com	mittee X Joint F	undraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone numl	per – optional)		
	Mailing Address	1			
	ag / tau. eee				
		_ CITY ▲		STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	V	Tolo	phone Number	[-] [-]
			Tele	priorie Number	
	safety deposit boxes or ma	ies: List all banks or other depointains funds.	ositories in which the	e committee deposit	s funds, holds accounts, rents
	Depository, etc.				
	Mailing Address				
_		OITY A		CTATE A	7/D CODE 4
		CITY ▲		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
TEAM SCALISE	FEDERAL		
	247 45TH CTPET NE		
Mailing Address	317 15TH STREET NE		
	WASHINGTON	DC	20002
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	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 Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	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 CITY Tories: List all banks or other depositories in which	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	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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FEC Form 1S (Revised 02/2017)

5(a)	or(h). Joint Fundraising	g Participant:		
· (9)	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	С
	4		. 20 ib nameer	
6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA I	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
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	maming rusioss		1 1 . 1	
		CITY	STATE A	ZIP CODE A
	TITLE OR POSITION	I	STATE A	ZIP CODE A
		•	STATE A	ZIP CODE A
9.	TITLE OR POSITION	ies: List all banks or other depositories in which	Telephone Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositories in which	Telephone Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositories in which	Telephone Number	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraising	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 C TEAM MACARTHU	Organization, Affiliated Committee, Joint Fun JR	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 9891		
	ARLINGTON	, , , , VA	22219
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
Designated Agent: Identify	by name, address (phone number - optional)		
Pesignated Agent: Identify Full Name Mailing 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		
Full Name Mailing Address	CITY es: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorical deposit boxes or main land and provided the second of Bank, Depository, etc.	CITY es: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S. MILLEDGE AVENUE		
		SUITE 101	ı GA ı	30605
	Relationship:			
		CITY ▲ Organization	STATE ▲ undraising Representa	ZIP CODE ▲ ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	phone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ies: List all banks or other depositories in which th intains funds.	e committee deposit	s funds, holds accounts, rents
	Name of Bank.			
	Name of Bank, Depository, etc.			
	Depository, etc.			
	Depository, etc.			

FEC Form 1S (Revised 02/2017)

g) or)	r(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
- 6. I	Name of Any Connected WITTMAN VICTO	Organization, Affiliated Committee, Joint Fund ORY COMMITTEE	draising Representativ	e, or Leadership PAC Sponsor
			<u> </u>	
	Mailing Address	P.O. BOX 26141		
		ALEXANDRIA		22313
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Sponsor
3. I		y by name, address (phone number - optional)		
	Full Name			
	Full Name			
		CITY A	STATE A	ZIP CODE A
	Mailing Address	•		
1	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦
1	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail boxes or mail boxes. Depository, etc.	ries: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦
1	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦
1	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail boxes or mail boxes. Depository, etc.	ries: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦
1	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main main management of Bank, Depository, etc.	ries: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE 🛦

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

1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	С
of A Oto-d	Ourselinstine Affiliated Committee Laint Franch	sisina Danas satetia	a an Landauskin BAO Coan
-	Organization, Affiliated Committee, Joint Fundr ORY COMMITTEE	aising Representative	e, or Leadership PAC Spon
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, , VA ,	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC S
	Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

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

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint Fundr CTORY COMMITTEE	raising Representative	e, or Leadership PAC Spon
Mailing Address	P.O. BOX 26141		
amg			
	ALEXANDRIA	, VA	22313
Deletteration			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC S
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	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin g	ı Participant:			
	1		FEC II	number	C
	2.		FEC II	number	С
	3		FEC II	number	C
	4		FEC II) number	С
6.		Organization, Affiliated Committee, Joint F	undraising Rep	presentative	e, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON STREET			
		SUITE 115			
		ALEXANDRIA		L VA	22314
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Joint Fundraising	g Representa	Leadership PAC Sponsor
8.		by name, address (phone number - options	ıl)		
	Full Name				
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲		STATE A	ZIP CODE ▲
			Telephone N	umber	
9.	safety deposit boxes or mai	ies: List all banks or other depositories in w ntains funds.	hich the commi	ttee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.				
	Mailing Address				
ı		CITY ▲		STATE A	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

h). Joint Fundrais i	ng Participant:	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
GREG PENCE \	/ICTORY		
Mailing Address	P.O. BOX 275		
	TAYLORSVILLE	IN	47280
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	ify by name, address (phone number – optional)	Trundraising Hepresenta	Leadership FAC 3
esignated Agent: Ident			Leadership FAC 5
esignated Agent: Ident			Leadership FAC 5
esignated Agent: Ident			Leadership FAC 5
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)	STATE A	ZIP CODE A
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esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi	ig raiticipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Funds	aising Representative	e, or Leadership PAC Spon
TEAM CURTIS J	OINT FUNDRAISING COMMITTEE		
	370 EAST SOUTH TEMPLE		
Mailing Address	SUITE 580		
	SALT LAKE CITY	UT	84111
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representa	
esignated Agent: Identii Full Name Mailing Address	by by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	by by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	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.	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Page $\underline{\frac{102}{}}$ of $\underline{\frac{206}{}}$

h). Joint Fundraisi		FEC ID number	C
		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		T LO ID Hullibel	0
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
TEAM MARTY			
Mailing Address	P.O. BOX 26141		
Mailing Address			
	ALEXANDRIA	, VA	22313
Deletionship			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
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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	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page $\frac{103}{}$ of $\frac{206}{}$

h). Joint Fundraisi i			FEC ID i	numher	C
1.			FEC ID 1		C
2.			J		
3.			FEC ID i		С
4.			FEC ID i	number	C
		I Committee, Joint Fu	ndraising Repre	esentative	, or Leadership PAC Spon
BLUM VICTORY	FUND				
Mailing Address	P.O. BOX 26141				
	ALEXANDRIA			VA	22313
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connecte	d Organization Affilia	ated Committee	oint Fundraising F	Representa	tive Leadership PAC S
esignated Agent: Identif				Representa	tive Leadership PAC S
esignated Agent: Identif				Representa	tive Leadership PAC S
esignated Agent: Identif				Representa	tive Leadership PAC S
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esignated Agent: Identif	y by name, address (pho	one number – optional			
esignated Agent: Identif	y by name, address (pho	one number – optional		Representa	
esignated Agent: Identif Full Name Mailing Address	y by name, address (pho	one number – optional		TATE A	
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (pho	one number – optional	ST Telephone Nun	TATE Anber	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (pho	one number – optional	ST Telephone Nun	TATE Anber	ZIP CODE A

FEC Form 1S (Revised 02/2017)

n). Joint Fundraising	,						
1.				J	C ID number		
2.] FE	C ID number	С	
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4.				J FE	C ID number	С	
ame of Any Connected		liated Committe	ee, Joint Fu	ndraising	Representati	ve, or L	eadership PAC Spo
KIM VICTORY FU	И D						
Mailing Address	9460 TEGNER F	ROAD					
	HILMAR				CA	9	5324
Relationship:		CITY A			STATE A	_	ZIP CODE ▲
Connected	Organization	Affiliated Comm	nittee 🗶 J	oint Fundra	aising Represer	ntative	Leadership PAC
					aising Represer	ntative	Leadership PAC
esignated Agent: Identify					aising Represe	ntative	Leadership PAC
esignated Agent: Identify Full Name					aising Represe	ntative	Leadership PAC
esignated Agent: Identify Full Name	by name, address		er – optional				Leadership PAC
esignated Agent: Identify Full Name	by name, address	s (phone numbe	er – optional				
esignated Agent: Identify Full Name Mailing Address	by name, address	s (phone numbe	er – optional				
esignated Agent: Identify Full Name Mailing Address	by name, address	city A	er – optional	Telephor	STATE Anne Number		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail	by name, address	city A	er – optional	Telephor	STATE Anne Number		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, address	city A	er – optional	Telephor	STATE Anne Number		ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ig raiticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
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lame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representativ	e, or Leadership PAC Spons
WALBERG WINN	NING UNDER THE OAKS		
Mailing Address	2870 DOBIE ROAD		
	MASON	MI	48854
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte esignated Agent: Identif		int Fundraising Represent	ative Leadership PAC Sp
	y by name, address (phone number – optional)		
esignated Agent: Identif			
Pesignated Agent: Identif			
esignated Agent: Identif			
Pesignated Agent: Identife Full Name Mailing Address	y by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Identif	y by name, address (phone number – optional) CITY		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi r	ig i di dolpanti		
1.		FEC ID number	C
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3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
WEBBER VICTO	RY COMMITTEE		
1			
Mailing Address	332 W. LEE HIGHWAY		
	#303 		
	WARRENTON	VA I	20186
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Join y by name, address (phone number – optional)		
esignated Agent: Identif	d Organization Affiliated Committee Join y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee Join y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee Join y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	Affiliated Committee y by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or marks	Affiliated Committee y by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	Affiliated Committee y by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or materials and the same of Bank,	Affiliated Committee y by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisin		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
7.			
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
STAUBER VICTO	PRY FUND		
Mailing Address	332 W. LEE HIGHWAY		
Mailing Address	#303		
	WARRENTON	, VA	20186
Relationship:	CITY A	STATE A	ZIP CODE A
		OTATE	211 0002 2
	Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	r by name, address (phone number – optional) CITY Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full NameMailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	r by name, address (phone number – optional) CITY Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	r by name, address (phone number – optional) CITY Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full NameMailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	r by name, address (phone number – optional) CITY Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc and	r by name, address (phone number – optional) CITY Terries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

5(g) o	r(h). Joint Fundraisi r	ng Participant:		
	1		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected MAJORITY VICTO	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	WAJORTT VICTO	OKT FROGRAM		
	Mailing Address	P.O. BOX 9891		
	Mailing Address			
		ARLINGTON	ı VA ı	, 22219
	Relationship:	CITY A	STATE A	ZIP CODE A
			Fundraising Representa	
	Connecte	Allillated Committee John	rundialsing hepresent	Leadership FAC Sponsor
8.	Designated Agent: Identif	y by name, address (phone number - optional)		
8.	Designated Agent: Identif	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name		CTATE A	7ID CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	
-	Full Name Mailing Address TITLE OR POSITION	CITY A	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tel pries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
- 9.	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tel pries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorsafety deposit boxes or maintenance.	CITY CITY Tel pries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mails and the safety deposit boxes or mails and the safety deposit boxes.	CITY CITY Tel pries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail of Bank, Depository, etc.	CITY CITY Tel pries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail of Bank, Depository, etc.	CITY CITY Tel pries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦

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1				
2.			FEC ID number	С
			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
lame of Any Connected	Organization, Affiliated	Committee, Joint Fund	raising Representati	ve, or Leadership PAC Spons
MILLER VICTOR	Y FUND			
Mailing Address	228 S. WASHINGTON	STREET		
	SUITE 115			
	ALEXANDRIA		, , , , VA	22314
Relationship:		CITY A	STATE 4	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phor	ne number – optional)		
Mailing Address				
J 11 111				
			OT!TE :	ZIP CODE ▲
	(
TITLE OR POSITION	▼	CITY A	STATE ▲	ZIF CODE A

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

Page 110 of 206

(h). Joint Fundrais	ing rantopanti		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Lilia			
Mailing Address	IRVINE CENTER DRIVE		
	#150		
	IRVINE	CA CA	92618
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connect		oint Fundraising Represent	ative Leadership PAC Sp
Connect	ed Organization Affiliated Committee		ative Leadership PAC Sp
Connect	ed Organization Affiliated Committee		Leadership PAC Sp
esignated Agent: Ident	ed Organization Affiliated Committee		Leadership PAC Sp
esignated Agent: Ident	ed Organization Affiliated Committee Affiliated Committee If y by name, address (phone number – optional)		
esignated Agent: Ident	ed Organization Affiliated Committee Affiliated Committee If you have address (phone number – optional)		Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ed Organization Affiliated Committee Affiliated Committee If you have address (phone number – optional)		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ed Organization Affiliated Committee ify by name, address (phone number – optional) CITY ▲ CITY ▲ cories: List all banks or other depositories in whenaintains funds.	STATE A Telephone Number ch 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.	ed Organization Affiliated Committee ify by name, address (phone number – optional) CITY ▲ CITY ▲ cories: List all banks or other depositories in whenaintains funds.	STATE A Telephone Number ch the committee deposit	ZIP CODE A ts funds, holds accounts, rent

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

Page 111 of 206

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
BUDD HARRIS \	/ICTORY FUND		
Mailing Address	PO BOX 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
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	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi 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 Telepories: List all banks or other depositories in which	STATE A	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	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	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	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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(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
lame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
WATKINS VICTO	DRY COMMITTEE		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Spo
Connecte Pesignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connecte Pesignated Agent: Identif	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	
Connecte Designated Agent: Identification Full Name Mailing Address	Affiliated Committee Affiliated Committee Figure 1. Join 1.		
Connecte Designated Agent: Identification Full Name Mailing Address	Affiliated Committee Affiliated Committee Figure 1. Join 1.	STATE A	
Connected Designated Agent: Identification of the Position Connected Designated Desig	Affiliated Committee Affiliated Committee To Join Affiliated Committee Affiliated Committe	STATE A	ZIP CODE A
Connected Pesignated Agent: Identification of the Position of	Affiliated Committee Affiliated Committee To Join Affiliated Committee Affiliated Committe	STATE A	ZIP CODE A
Connected Designated Agent: Identification of the Position Connected Designated Desig	Affiliated Committee Affiliated Committee To Join Affiliated Committee Affiliated Committe	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 same of Bank,	Affiliated Committee Affiliated Committee To Join Affiliated Committee Affiliated Committe	STATE A	ZIP CODE A
Connected Pesignated Agent: Identification of Bank, Depository, etc.	Affiliated Committee Affiliated Committee To Join Affiliated Committee Affiliated Committe	STATE A	ZIP CODE A
Connected Pesignated Agent: Identification of Bank, Depository, etc.	Affiliated Committee Affiliated Committee To Join Affiliated Committee Affiliated Committe	STATE A	ZIP CODE A

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

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1.	(h). Joint Fundraisi	ng Participant:		
3.	1.		FEC ID number	C
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sport PAULSEN VICTORY FUND Mailing Address 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC S Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	2.		FEC ID number	С
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spo PAULSEN VICTORY FUND Mailing Address 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC S Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	3.		FEC ID number	C
PAULSEN VICTORY FUND Mailing Address 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA Connected Organization Affiliated Committee ✓ Joint Fundraising Representative Leadership PAC S Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	4		FEC ID number	С
PAULSEN VICTORY FUND Mailing Address 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA Connected Organization Affiliated Committee ✓ Joint Fundraising Representative Leadership PAC S Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲				
Mailing Address 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA Connected Organization Affiliated Committee ✓ Joint Fundraising Representative Leadership PAC S Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ✓ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲			ndraising Representativ	e, or Leadership PAC Spons
STE. 115 ALEXANDRIA ALEXANDRIA Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC S Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	L L L L L L L L L L L L L L L L L L L			
STE. 115 ALEXANDRIA ALEXANDRIA Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC S Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲				
ALEXANDRIA Connected Organization	Mailing Address	228 S. WASHINGTON ST.		
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC S Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲		STE. 115		
Connected Organization		ALEXANDRIA	, , , , , VA	22314
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲	Connecte	ed Organization Affiliated Committee	oint Fundraising Represent	Leadership PAC Spo
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	Designated Agent: Identi			ative Leadership PAC Spo
TITLE OR POSITION ▼	Designated Agent: Identi			Leadership PAC Spo
TITLE OR POSITION ▼	Designated Agent: Identi			Leadership PAC Spo
TITLE OR POSITION ▼	Designated Agent: Identi			Leadership PAC Spo
	Designated Agent: Identi	fy by name, address (phone number – optional)		
	Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
	Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	
	Pesignated 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 wh	STATE A Telephone Number	ZIP CODE A
	Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of the content of the co	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Name of Bank,	Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or maken and maken agents.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Name of Bank,	Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Name of Bank, Depository, etc.	Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Name of Bank, Depository, etc.	Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional) 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

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5(g) or	(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
- 6. N	Name of Any Connected MIKE MILLER VIC	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S MILLEDGE AVE, STE 101		
		ATHENS	GA	30605
	Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
	Connected	1 Organization Affiliated Committee X Joint I	Fundraising Representa	Leadership PAC Sponsor
8. D	Designated Agent: Identify	by name, address (phone number – optional)		
8. D	Designated Agent: Identify	by name, address (phone number – optional)		
8. D		by name, address (phone number – optional)		
- 8. D	Full Name	by name, address (phone number – optional)		
_ 8. D	Full Name	by name, address (phone number – optional)		
- 8. D	Full Name	CITY A	STATE A	ZIP CODE A
- 8. D	Full Name	CITY A	STATE A	
9. E s	Full Name Mailing Address TITLE OR POSITION	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

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5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	YOHO VICTORY	FUND 		
	Mailing Address	824 S. MILLEDGE AVE., STE. 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.				
8.	Designated Agent: Identify			
8.	Designated Agent: Identify Full Name			
8.	Designated Agent: Identify Full Name			
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.	Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
9.	Designated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
	Designated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
	Pull Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail.	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A
	Designated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A
	Designated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	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	n). Joint Fundraising	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	BR VICTORY 201	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
L				
	Mailing Address	1006 PENDLETON ST.		
		ALEXANDRIA	ı VA ı	, 22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected		undraising Representa	
3. De	esignated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Full Name			
	Full Name			
	Full Name	CITY	STATE A	ZIP CODE A
	Full Name	CITY A		
saf Na	Full Name	CITY CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE 🛦
sat Na	Full Name Mailing Address TITLE OR POSITION Inks or Other Depositor fety deposit boxes or main arme of Bank,	CITY CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE 🛦
saf Na	Full Name Mailing Address TITLE OR POSITION Inks or Other Depositor fety deposit boxes or main arms of Bank, expository, etc.	CITY CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE 🛦
saf Na	Full Name Mailing Address TITLE OR POSITION Inks or Other Depositor fety deposit boxes or main arms of Bank, expository, etc.	CITY CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE 🛦

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

Page $\underline{\frac{117}{}}$ of $\underline{\frac{206}{}}$

h). Joint Fundraisin	= -			
1			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
	Organization, Affiliated Co	ommittee, Joint Fundi	aising Representativ	e, or Leadership PAC Spons
WINNING PA				
	_I PO BOX 9891			
Mailing Address				
	ARUNATAN)/A	22240
			VA	22219
	ARLINGTON			
	C		STATE Fundraising Represen	
Connected	C Organization Affiliated	Committee X Joint		
Connected esignated Agent: Identify	C Organization Affiliated	Committee X Joint		
esignated Agent: Identify Full Name	C Organization Affiliated	Committee X Joint		
Connected esignated Agent: Identify Full Name	C Organization Affiliated	Committee X Joint		
Connected esignated Agent: Identify Full Name	Organization Affiliated by name, address (phone	Committee X Joint		tative Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	Organization Affiliated by name, address (phone	number – optional)	Fundraising Represen	Leadership PAC Sp

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

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponso
CHRIN WEBBER	R VICTORY COMMITTEE		
Mailing Address	332 W LEE HWY		
	# 303		
	WARRENTON		20186
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	
	y by name, address (phone number – optional)		ative Leadership PAC Spo
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi	y by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identi Full Name Mailing Address	by by name, address (phone number – optional) CITY		
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 which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	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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(h). Joint Fundraisir	g raiticipant.		
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	220 FINDLAY ST.		
	CINCINNATI	OH	45202
Relationship:	CITY A	STATE A	ZIP CODE ▲
	d Organization	oint Fundraising Represent	tative Leadership PAC Spo
			Leadership PAC Spo
Designated Agent: Identif			Leadership PAC Spo
Designated Agent: Identif			Leadership PAC Spo
Designated Agent: Identif			Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – optional)		Leadership PAC Spo
Designated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name	ries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fundr ER VICTORY FUND	aising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 26141		
Ü			
	ALEXANDRIA	VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Te	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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h). Joint Fundraisi		FEC ID number	C
		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		I LO ID Hullibel	O
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
RIGGLEMAN VI	CTORY FUND		
I			
Mailing Address	PO BOX 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	Affiliated Committee	t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC S
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h). Joint Fundraisi	g . a. a		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
RIGGLEMAN VIO	CTORY COMMITTEE		
	7000 07100 50 100 100		
Mailing Address	7330 STAPLES MILL RD.		
	NUM 100		
	RICHMOND	VA V	23228
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	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 Topries: List all banks or other depositories in which	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	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
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(g) or (h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fundra W VICTORY COMMITTEE	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee	Fundraising Representa	Leadership PAC Sponso
Full Name		1 1 1 1 1 1 1	
Mailing Address			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
THEE OIL CONTO	Y Y		
	I	ephone Number	
	ories: List all banks or other depositories in which the		s funds, holds accounts, rents
Banks or Other Deposite safety deposit boxes or management Name of Bank, Depository, etc.	ories: List all banks or other depositories in which the		s funds, holds accounts, rents
Banks or Other Deposite safety deposit boxes or m	ories: List all banks or other depositories in which the		s funds, holds accounts, rents

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h). Joint Fundraising	Participant:				
1.				EC ID number	С
2.			FE	EC ID number	С
3.			FE	EC ID number	С
4.			FE	EC ID number	C
		ed Committee, Joint	Fundraising	g Representativ	ve, or Leadership PAC Sp
DUNN VICTORY F	-UND 				
Mailing Address	12176 CHANCERY	STATION CIR			
	RESTON			VA	20190
Relationship:		CITY A		STATE A	ZIP CODE
Connected	Organization Affi	iliated Committee	✗ Joint Fund	raising Represen	tative Leadership PAC
				raising Represen	tative Leadership PAC
				raising Represen	tative Leadership PAC
esignated Agent: Identify				raising Represen	tative Leadership PAC
esignated Agent: Identify Full Name				raising Represen	tative Leadership PAC
esignated Agent: Identify Full Name	by name, address (pl		nal)		tative Leadership PAC
esignated Agent: Identify Full Name	by name, address (pl	hone number – optio	nal)		
esignated Agent: Identify Full Name Mailing Address	by name, address (pl	hone number – optic	nal)		
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Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftety deposit boxes or mail ame of Bank, epository, etc.	by name, address (pl	hone number – optic	nal)	STATE A	ZIP CODE A

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4		FEC ID number	С
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID Hullibel	O
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
GUEST MAJOR	TY FUND		
Mailing Address	120 N CONGRES ST STE 300		
ag / taa.eee			
	JACKSON	MS	39201
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
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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 Fundr	aisina Ponrosontativ	or Leadership PAC Spon
TEAM CHENEY	Organization, Annuaca Committee, Committee	along ricpresentative	., or readership the opon
Mailing Address	3538 SOUTH WAKEFIELD ST.		
Mailing Address			
	ARLINGTON	VA I	22206
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	I Organization	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sparitive Leadership PAC Sparitive ZIP CODE ZIP CODE
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
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esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main arms of Bank,	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
GREG STEUBE	VICTORY FUND		
Mailine Addus a	499 SOUTH CAPITOL STREET SW		
Mailing Address	ı #407		
			00000
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Joint Joint y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional) CITY		
esignated Agent: Identif	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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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 To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
LATTA VICTORY	FUND		
Mailing Address	9856 ARCHER LANE		
	DUBLIN	OH	43017
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC S
Connected		Fundraising Represent	Leadership PAC S
Connected esignated Agent: Identify	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representation	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	d Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
Connected esignated Agent: Identify Full Name	Affiliated Committee y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	Affiliated Committee y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	1	FEC ID number	С
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4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
GONZALEZ VICT	ORY FUND		
Mailing Address	9856 ARCHER LANE		
	DUBLIN	OH	43017
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee Joint Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
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esignated Agent: Identif	y by name, address (phone number – optional)		
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esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	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 Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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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 Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundrais	ing ransipanii		
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2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connecte	d Organization, Affiliated Committee, Joint Fund	raising Representative	e. or Leadership PAC Spon
SERVANT LEAD			,, or
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
			_
		t Fundraising Representa	Leadership PAC S
	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC S
esignated Agent: Ident		t Fundraising Representa	Leadership PAC S
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esignated Agent: Ident		t Fundraising Representa	Leadership PAC S
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)	st Fundraising Representation	
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esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or necessity.	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositatety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositatety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

h). Joint Fundraisin	9 . m		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected BUCKEYE VICTO	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
BOOKE TE VIOTO			
Mailing Address	499 SOUTH CAPITOL STREET SW		
mailing / taarooc	407		
	WASHINGTON	, DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE A
riciationship.	CITT A	SIAIE	ZIF CODE
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc and	ries: List all banks or other depositories in which	STATE A	ZIP CODE A

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n). Joint Fundraising							
1.					ID number	C	
2.				FEC	ID number	С	
3.				FEC	ID number	C	
4.				FEC	ID number	C	
ame of Any Connected C	organization, Affi	liated Committe	ee, Joint Fun	draising R	epresentativ	e, or Lead	ership PAC Spo
NDSTRONG							
Mailing Address	1515 BURNT BO	DAT DR NUM 112	2				
	BISMARCK				ND	5850	3
Relationship:		CITY A			STATE A		ZIP CODE ▲
	Organization	Affiliated Comm	ittee 🗶 Jo	int Fundrais	ng Represent	ative	Leadership PAC
Connected esignated Agent: Identify		Affiliated Comm		int Fundrais	ng Represent	ative	Leadership PAC
Connected esignated Agent: Identify Full Name		Affiliated Comm		int Fundrais	ng Represent	ative	Leadership PAC
Connected esignated Agent: Identify		Affiliated Comm		int Fundrais	ng Represent	ative	Leadership PAC
Connected esignated Agent: Identify Full Name		Affiliated Comm		int Fundrais	ng Represent	ative	Leadership PAC
Connected esignated Agent: Identify Full Name	by name, address	Affiliated Comm	er – optional)				
Connected esignated Agent: Identify Full Name	by name, address	Affiliated Common	er – optional)		ng Represent		
Connected esignated Agent: Identify Full Name Mailing Address	by name, address	Affiliated Comm	er – optional)		STATE A		
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Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoric	by name, address	Affiliated Common	or – optional)	Telephone	STATE A Number		ZIP CODE A
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositorion fety deposit boxes or main ame of Bank,	by name, address	Affiliated Common	or – optional)	Telephone	STATE A Number		ZIP CODE A
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositorion fety deposit boxes or main ame of Bank, epository, etc.	by name, address	Affiliated Common	or – optional)	Telephone	STATE A Number		ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

n). Joint Fundraisi	ng 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	I Organization, Affiliated Committee, Joint Fo	undraising Representativ	e, or Leadership PAC Spon
Mailing Address	PO BOX 2404		
	COOKEVILLE	TN	38502
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC S
Connecte			ative Leadership PAC S
Connecte	ed Organization Affiliated Committee		ative Leadership PAC S
Connecte esignated Agent: Identi	ed Organization Affiliated Committee		ative Leadership PAC S
Connecte esignated Agent: Identi	Affiliated Committee fy by name, address (phone number – optiona		
Connecte esignated Agent: Identi Full Name Mailing Address	Affiliated Committee fy by name, address (phone number – optiona		
Connecte esignated Agent: Identi	Affiliated Committee fy by name, address (phone number – optiona		
Connecte esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in wheel of the committee of the	STATE A Telephone Number	ZIP CODE A
Connected Agent: Identification of Bank, Connected Connected Agent: Identification of	Affiliated Committee fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in wheel of the committee of the	STATE A Telephone Number	ZIP CODE A
Connected Agent: Identification of Bank, epository, etc.	Affiliated Committee fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in wheel of the committee of the	STATE A Telephone Number	ZIP CODE A
Connected Agent: Identification of Bank, epository, etc.	Affiliated Committee fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in wheel of the committee of the	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundral N VICTORY COMMITTEE	aising Representative	e, or Leadership PAC Spon
	N VICTORY CONNINTYEE		
Mailing Address	PO BOX 365		
Maining / Radioso			
	MCLEAN	ı VA	22101
Relationship:	CITY A	STATE A	ZIP CODE A
rielationship.	CITY A	SIAIE	
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Represent	Leadership PAC S
esignated Agent: Identif		Fundraising Represent	Leadership PAC S
esignated Agent: Identif		Fundraising Represent	Leadership PAC S
esignated Agent: Identif		Fundraising Represent	Leadership PAC S
esignated Agent: Identif		Fundraising Represent	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Represent	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposited afety deposit boxes or mail	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions.	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

TITLE OR POSITION Banks or Other Deposito afety deposit boxes or management of Bank, Depository, etc. Mailing Address	ries: List all banks	s or other depositories in whether depositories in which is a supplication of the properties of	Telephone Number	sits funds, holds accounts, rents
Banks or Other Deposito afety deposit boxes or malame of Bank, Depository, etc.	ries: List all banks	s or other depositories in whether depositories in which is a supplication of the properties of the pr		its funds, holds accounts, rents
Banks or Other Deposito afety deposit boxes or malame of Bank, Depository, etc.	ries: List all banks	s or other depositories in whether the second secon		sits funds, holds accounts, rents
Banks or Other Deposito afety deposit boxes or ma	ries: List all banks	s or other depositories in wh		sits funds, holds accounts, rents
Banks or Other Deposito	ries: List all banks	s or other depositories in wh		sits funds, holds accounts, rents
				ita fundo helda sasa di su
TITLE OR POSITION	▼		Telephone Number	
TITLE OR POSITION	▼			
	_	CITY A	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
Designated Agent: Identify	by name, address	s (phone number – optiona)	
Connected	d Organization	Affiliated Committee	Joint Fundraising Represer	tative Leadership PAC Spo
Relationship:		CITY A	STATE 4	ZIP CODE ▲
	ATHENS		GA	30605
<u>3</u>				
Mailing Address	824 S MILLEDG	GE AVE STE 101		
Name of Any Connected HRW VICTORY F		iliated Committee, Joint Fo	Indraising Representati	ve, or Leadership PAC Sponso
4.			J	
.			FEC ID number	C
3			FEC ID number	C
3			FEC ID number FEC ID number	C
2				

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

TEAM TIMMONS Mailing Address Relationship: Connected Organical Contents of the contents of	anization, Affiliated Committee, 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA ganization Affiliated Committee name, address (phone number —	Joint Fundraisi	FEC ID number FEC ID number FEC ID number REC ID number REPRESENTATE VA STATE A	ive, or Leadership PAC Sp
ame of Any Connected Org TEAM TIMMONS Mailing Address Relationship: Connected Org Connected Org esignated Agent: Identify by	228 S. WASHINGTON ST. STE. 115 ALEXANDRIA CITY ganization Affiliated Committee	Joint Fundraisi	FEC ID number FEC ID number ng Representati	C C Sive, or Leadership PAC Sp. 22314
ame of Any Connected Org TEAM TIMMONS Mailing Address Relationship: Connected Org esignated Agent: Identify by	228 S. WASHINGTON ST. STE. 115 ALEXANDRIA CITY ganization Affiliated Committee	Joint Fundraisi	rec ID number ng Representati	ive, or Leadership PAC Sp
ame of Any Connected Org TEAM TIMMONS Mailing Address Relationship: Connected Org	228 S. WASHINGTON ST. STE. 115 ALEXANDRIA CITY ganization Affiliated Committee	Joint Fundraisi	ng Representati	ive, or Leadership PAC Sp
TEAM TIMMONS	228 S. WASHINGTON ST. STE. 115 ALEXANDRIA CITY ganization Affiliated Committee		VA STATE A	22314 ZIP CODE A
Mailing Address Relationship: Connected Orgensesignated Agent: Identify by	STE. 115 ALEXANDRIA CITY ganization	e X Joint Fur	STATE A	ZIP CODE A
Mailing Address Relationship: Connected Orgensignated Agent: Identify by	STE. 115 ALEXANDRIA CITY ganization	e X Joint Fur	STATE A	ZIP CODE A
Mailing Address Relationship: Connected Orgensignated Agent: Identify by	STE. 115 ALEXANDRIA CITY ganization	e X Joint Fur	STATE A	ZIP CODE A
Relationship: Connected Orgensesignated Agent: Identify by	ALEXANDRIA CITY ganization	e X Joint Fur	STATE A	ZIP CODE A
Relationship: Connected Orgensesignated Agent: Identify by	CITY ▲ ganization Affiliated Committee	e X Joint Fur	STATE A	ZIP CODE A
Connected Orgenical Connec	ganization Affiliated Committee	e 🗴 Joint Fur		
esignated Agent: Identify by	_	e X Joint Fur	ndraising Represe	П
	name, address (prione namber –	ontional)		ntative Leadership PAC
Mailing Address				
L				
L	CITY A		STATE A	ZIP CODE A
TITLE OR POSITION ▼	5· 2	1		
		Teleph	hone Number	
anks or Other Depositories: afety deposit boxes or mainta	List all banks or other depositorins funds.	ies in which the	committee depo	sits funds, holds accounts,
ame of Bank, epository, etc.				
Mailing Address				

FEC Form 1S (Revised 02/2017)

Page $\underline{^{137}}$ of $\underline{^{206}}$

h). Joint Fundraisi	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
WESTERMAN V			
<u> </u>			
	PO BOX 21097		
Mailing Address			
	HOT SPRINGS	AR	71903
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
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	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	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 Telepories: List all banks or other depositories in which	STATE A	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 Telepories: List all banks or other depositories in which	STATE A	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 Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin g	յ Participant։		
	1		FEC ID number	C
	2.		FEC ID number	C
	3		FEC ID number	C
	4		FEC ID number	С
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	sing Representativ	e, or Leadership PAC Sponsor
	Mailing Address	824 S MILLEDGE AVE, STE 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee Joint Fo	undraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	phone Number	
9.				
	safety deposit boxes or mai	ies: List all banks or other depositories in which the ntains funds.	e committee deposit	s funds, holds accounts, rents
	safety deposit boxes or mai		e committee deposit	s funds, holds accounts, rents
	safety deposit boxes or mai		e committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.		e committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.		e committee deposit	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

h). Joint Fundraisi	ig Participant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
PATRIOT DAY 1	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	int Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	int Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee y Jo y by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee y Jo y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y Jo y by name, address (phone number – optional) CITY CITY CITY pries: List all banks or other depositories in which	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.	Affiliated Committee y Jo y by name, address (phone number – optional) CITY CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
MEUSER VICTO	RY FUND		
	499 SOUTH CAPITOL STREET SW		
Mailing Address	499 SOUTH CAPITOL STREET SW		
	#405 		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Joint by by name, address (phone number – optional)		
esignated Agent: Identif	d Organization Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representation	
esignated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee Joint by by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee Joint by by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	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	С
3.		FEC ID number	С
4.		FEC ID number	С
WAN TAYLOR VI	Organization, Affiliated Committee, Joint Fundr CTORY FUND	aising Representative	e, or Leadership PAC Spon
Mailing Address	1900 PRESTON ROAD		
	#267 - PMB 229		
	PLANO	TX	75093
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	y by name, address (phone number – optional)		Leadership TAC S
esignated Agent: Identif			Leadership TAC S
esignated Agent: Identif			Leadership TAC S
esignated Agent: Identif			Leadership TAC S
esignated Agent: Identii Full Name Mailing Address	y by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identif	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	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.	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	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
	ganization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
DAN BISHOP VICT	ORY COMMITTEE		
Martin Addison	10809 GRASSY CREEK PL		ı
Mailing Address			
	PALEIOU	NO.	07044
	RALEIGH	NC NC	27614
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected C	organization Affiliated Committee X Joint Fi	undraising Representa	ative Leadership PAC Sponsor
Full Name	y name, address (phone number – optional)		
	y name, address (phone number – optional)		
Full Name	y name, address (phone number – optional)		
Full Name			
Full Name		STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name	CITY ▲ Tele	phone Number	ZIP CODE 🛦

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

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1.			FEC ID	number	C
2.			FEC ID) number	С
3.			FEC ID	number	С
4.			FEC ID) number	C
			_		
ame of Any Connected	Organization, Affilia	ted Committee, Joint F	undraising Rep	resentativ	e, or Leadership PAC Spons
TEAM HUIZENG	4				
Mailing Address	PO BOX 2485				
				VA	22152
	SPRINGFIELD				
	d Organization A		Joint Fundraising	STATE A	ZIP CODE ▲ ative Leadership PAC Sp
Connected	d Organization A	Affiliated Committee X			
Connecter connec	d Organization A	Affiliated Committee X			
esignated Agent: Identif	d Organization A	Affiliated Committee X			
esignated Agent: Identif	d Organization A	(phone number – optional			ative Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	d Organization A	Affiliated Committee (phone number – optional)	il)	g Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization A	(phone number – optional	il)	Represent	ative Leadership PAC Sp

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

h). Joint Fundraisi	1	EEC ID mooned and	С
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	I Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
TAKE BACK THE			
Mailing Address	PO BOX 30844		
Mailing Address			
	BETHESDA	MD	20824
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC Sp
	fy by name, address (phone number – optional)	t Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identi		t Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		T Fundraising Representation	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	Leadership PAC S
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	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi 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 Telepries: List all banks or other depositories in which	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	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	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	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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Page 145 of 206

epository, etc. Lilia					
epository, etc.					
ame of Bank,					
anks or Other Depositor afety deposit boxes or ma		s or other depositories in	which the commi	ttee deposit	es funds, holds accounts, ren
			Telephone N	umber	
TITLE OR POSITION	▼	CITY ▲		STATE A	ZIP CODE ▲
		CITY		CTATE 1	ZID CODE A
Mailing Address					
Full Name					
esignated Agent: Identify		es (phone number – option		y nepresent	Leadership FAC 5
	d Organization	1 -	Joint Fundraisin		
Relationship:	I WOITVILLE	CITY A		STATE A	ZIP CODE A
	NASHVILLE			ı TN ı	37205
Mailing Address	95 WHITE BRID	DGE RD			
ame of Any Connected FRIENDS OF BUI		iliated Committee, Joint	Fundraising Re _l	oresentativ	e, or Leadership PAC Spon
4				- Hamber	0
3.				O number O number	C
2.				number	C
				0 number	C

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

5(g) or (h).	Joint Fundraising	Participant:				
1.			FEC	ID number	C	
2.			FEC	ID number	C	
3.			FEC	ID number	С	
4.			FEC	ID number	С	
	of Any Connected C	Organization, Affiliated Committee COMMITTEE	, Joint Fundraising F	epresentative	e, or Leadership PA	.C Sponsor
V	Mailing Address	4031 THICKET LANE				
		HARRISBURG		PA	17110	- , , ,
F	Relationship:	CITY 🛦		STATE ▲	ZIP CC	DDE 🛦
		by name, address (phone number	- optional)			
Ful	I Name					
Ma						
	iling Address					
	iling Address					
	iling Address					- [, , , ,
	iling Address TLE OR POSITION	CITY A		STATE A	ZIP COD	- L
		CITY A	Telephone		ZIP COD	-
9. Banks safety of Name of Deposit	TLE OR POSITION	es: List all banks or other deposito		Number		
9. Banks safety of Name of Deposit	or Other Depositorideposit boxes or main of Bank, tory, etc.	es: List all banks or other deposito		Number		
9. Banks safety of Name of Deposit	or Other Depositorideposit boxes or main of Bank, tory, etc.	es: List all banks or other deposito		Number		- [

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

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h). Joint Fundraisi		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
JUDGE CARTER	R VICTORY FUND		
Mailing Address	22780 INDIAN CREEK DR.		
Mailing Address	SUITE 100		
	DULLES	, VA	20166
Relationship:			
neialionship.	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated 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	ZIP CODE A
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 To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated 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	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected SC 01 NOMINEE	I Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
SC 01 NOWINEE	. FUND 2020 		
Mailing Address	228 S. WASHINGTON STREET		
Maining / Idanooc	SUITE 115		
	ALEXANDRIA	, VA	22314
Relationship:	CITY A		ZIP CODE ▲
neiationship.	CITY A	STATE ▲	ZIP CODE A
	Affiliated Committee	: Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identii Full Name	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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4.				FEC I	D number	C
	ny Connected C		iliated Committee, Joint	Fundraising Re	epresentativ	ve, or Leadership PAC Spons
Mailing	g Address	P.O. BOX 3410	27			
		AUSTIN		1	TX	78734
Relatio	onship:		CITY ▲		STATE A	ZIP CODE ▲
		Organization		Joint Fundraisir	ng Represen	tative Leadership PAC Sp
	Agent: Identify		Affiliated Committee		ng Represen	tative Leadership PAC Sp
Full Nam	Agent: Identify				ng Represen	tative Leadership PAC Sp
	Agent: Identify				ng Represen	Leadership PAC Sp
Full Nam	Agent: Identify				ng Represen	Leadership PAC Sp
Full Nam	Agent: Identify ne Address	by name, addres	s (phone number – option			
Full Nam	Agent: Identify	by name, addres			STATE A	Leadership PAC Spanishing PAC Spani

FEC Form 1S (Revised 02/2017) for Lines 5

h). Joint Fundraisi	ig i artioipant.		
1.		FEC ID number	C
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3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
PATRIOT DAY II			
Moiling Address	228 S. WASHINGTON STREET		
Mailing Address	SUITE 115		
	ALEXANDRIA	ı VA ı	22314
Dalatia nalain.			
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC S
	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Ative Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name	fy by name, address (phone number – optional) CITY T	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	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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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 Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines

Banks or Other Deposite safety deposit boxes or more Name of Bank, Depository, etc. Mailing Address		ks or other depositories i	n which the comr	nittee deposit	s funds, h	olds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.		ks or other depositories i	n which the comm	nittee deposit	s funds, h	olds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.		ks or other depositories i	n which the comr	nittee deposit	s funds, h	olds accounts, rents
Banks or Other Deposito safety deposit boxes or m		ks or other depositories i	n which the comr	nittee deposit	s funds, h	olds accounts, rents
Banks or Other Deposito		ks or other depositories i	n which the comr	nittee deposit	s funds, h	olds accounts, rents
TITLE OR POSITION						
TITLE OR POSITION			Telephone	Number		1-1
	I ▼	CITY 🛦		STATE ▲		ZIP CODE ▲
			1	1 . 1	1	1 1
wamiy Addiess						
Mailing Address						
Designated Agent: Identif	y by name, addre	ess (pnone number – opt	ionai)		1 1 1	
				ng richieseill	advC	Loadership FAO 300
	d Organization	Affiliated Committee	X Joint Fundraisi		ative	Leadership PAC Spo
Relationship:	AUSTIN	CITY A		STATE A	1070	ZIP CODE A
	AUSTIN			, TX ,	7873	34
Mailing Address	P.O. BOX 341	1027				
Name of Any Connected ASHLEY HINSON			nt Fundraising R	epresentativ	e, or Lead	ership PAC Sponso
4.			FEC	ID number	C	
				ID number	C	
3				ID number	C	
2				ID number	C	

FEC Form 1S (Revised 02/2017)

1				ID !	С
				ID number	
2.			FEC	ID number	С
3.			FEC	ID number	C
4			FEC	ID number	C
	Organization, Affiliate	ed Committee, Joint	Fundraising F	Representativ	e, or Leadership PAC Spon
WIN IN 2020					
Mailing Address	320 FIRST STREET	SOUTHEAST			
	WASHINGTON			DC	20003
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
Connected	d Organization Aff	iliated Committee	X Joint Fundrais	sing Represent	ative Leadership PAC S
esignated Agent: Identify	by name, address (p	hone number – optic	nal)		
			παι)		
Full Name					
Full Name					
				STATE A	ZIP CODE A
Mailing Address					
Mailing Address TITLE OR POSITION anks or Other Depositor	▼ ries: List all banks or	CITY A	Telephone	Number _	
Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or maintain the second sec	▼ ries: List all banks or	CITY A	Telephone	Number _	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or maintain and of Bank,	▼ ries: List all banks or	CITY A	Telephone	Number _	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or maintain and of Bank,	▼ ries: List all banks or	CITY A	Telephone	Number _	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or main ame of Bank, epository, etc.	▼ ries: List all banks or	CITY A	Telephone	Number _	ZIP CODE A

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
THE VALADAO	VICTORY FUND		
Mailing Address	5132 N PALM AVE		
	NUM 227		
	FRESNO	CA CA	93704
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated 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	ZIP CODE A
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esignated 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	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	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

	ng 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
·			
	Organization, Affiliated Committee, Joint F	undraising Representa	tive, or Leadership PAC Spons
YOUNG VICTOR	(Y FUND		
Mailing Address	PO BOX 308		
	VAN METER	IA	50261
Relationship:	CITY ▲	STATE	▲ ZIP CODE ▲
		Joint Fundraising Repress	entative Leadership PAC Spo
	fy by name, address (phone number – optional	-	
Designated Agent: Identi		-	
Pesignated Agent: Identi		-	
Pesignated Agent: Identi		-	
Pesignated Agent: Identi	fy by name, address (phone number – optiona	-	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optiona	al)	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional state of the control	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or mailing and mailin	fy by name, address (phone number – optional state of the control	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	cories: List all banks or other depositories in waintains funds.	STATE A	ZIP CODE A sits funds, holds accounts, rents
Pesignated Agent: Identic Full Name	cories: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A sits funds, holds accounts, rents
Pesignated Agent: Identi Full Name	city by name, address (phone number – optional depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A sits funds, holds accounts, rents
Pesignated Agent: Identi Full Name	fy by name, address (phone number – optional states of the control	STATE A Telephone Number	ZIP CODE A sits funds, holds accounts, rents

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	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	I Organization, Affiliated Committee, Joint Fo	undraising Representative	e, or Leadership PAC Spons
TAKE BACK THE	E HOUSE CALIFORNIA 2020		
Mailing Address	P.O. BOX 30844		<u> </u>
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Full Name	fy by name, address (phone number – optiona	,	
Mailing Address			
Mailing Address			
Mailing Address			
Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	CITY A	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION	ories: List all banks or other depositories in wh	Telephone Number	
TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or management of Bank,	ories: List all banks or other depositories in wh	Telephone Number	
TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or management of Bank,	ories: List all banks or other depositories in wh	Telephone Number	
TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in wh	Telephone Number	
TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in wh	Telephone Number	

FEC Form 1S (Revised 02/2017)

	g Participant:			
1.		FEC ID	number	C
2		FEC ID	number	С
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4.		FEC ID	number	С
	Organization, Affiliated Committee, Joi	nt Fundraising Rep	resentativ	e, or Leadership PAC Spor
TAKE BACK THE	HOUSE TEXAS 2020			
	P.O. BOX 30844			
Mailing Address				
	DETUEODA		MD	20024
	BETHESDA		MD	20824
Relationship:	CITY ▲	_	STATE A	ZIP CODE ▲
				ative Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – op	tional)		
esignated Agent: Identify	y by name, address (phone number – op	tional)	1 1 1	
	y by name, address (phone number – op	tional)		
Full Name	y by name, address (phone number – op	tional)		
Full Name	y by name, address (phone number – op			
Full Name	CITY		STATE A	
Full Name Mailing Address	CITY		STATE A	
Full Name Mailing Address TITLE OR POSITION	CITY A	Telephone No	STATE umber	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A	Telephone No	STATE umber	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or material deposit boxes or material deposit boxes.	CITY A	Telephone No	STATE umber	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or material depositions are of Bank, epository, etc.	CITY A	Telephone No	STATE umber	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or material depositions are of Bank, epository, etc.	CITY A	Telephone No	STATE umber	ZIP CODE A

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Page $\underline{^{157}}$ of $\underline{^{206}}$

h). Joint Fundrais	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected LONG TEAM	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
LONGTEAN			
Mailing Address	P.O. BOX 3864		
Mailing Address			
	SPRINGFIELD	, MO	65808
Dalara akt			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)	STATE	
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional) CITY		
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FEC Form 1S (Revised 02/2017)

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4.			FEC ID nu	ımber	C
ame of Any Connected (rganization, Affiliated Com	mittee, Joint Fun	draising Repres	entative,	or Leadership PAC Spo
AUSTIN SCOTT V	CTORY FUND				
Mailing Address	824 S. MILLEDGE AVENUE				
	SUITE 101				
	ATHENS			GA	30605
Relationship:	CITY	·	ST	ATE A	ZIP CODE ▲
	Organization Affiliated Co		int Fundraising Re	presentati	ve Leadership PAC S
Connected		ommittee x Jo	int Fundraising Re	presentati	ve Leadership PAC S
Connected esignated Agent: Identify	Organization Affiliated Co	ommittee x Jo	int Fundraising Re	presentati	ve Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Co	ommittee x Jo	int Fundraising Re	presentati	ve Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Co	mber – optional)		presentati	ve Leadership PAC S
Connected esignated Agent: Identify Full Name Mailing Address	Organization Affiliated Co	ommittee		presentati	
Connected esignated Agent: Identify Full Name	Organization Affiliated Co	mber – optional)		TE A	
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Organization Affiliated Co	mber – optional)	STA Telephone Numb	TE A	ZIP CODE A
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connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoring the deposit boxes or main the depository, etc.	Organization Affiliated Co	mber – optional)	STA Telephone Numb	TE A	ZIP CODE A

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h). Joint Fundraisi	1	EEO ID	С
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ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
MAJORITY RISI	\G		
Mailing Address	P.O. BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
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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 CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisin		FEC ID number	C
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3.		FEC ID number	С
4.		FEC ID number	С
4.			
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
TEAM MURPHY			
	PO POV 2727		
Mailing Address	PO BOX 97275		
	RALEIGH	NC NC	27624
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

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h). Joint Fundraisi r	<u>, , , , , , , , , , , , , , , , ,</u>	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
HUDSON VICTO	KY FUND		
Mailing Address	824 S. MILLEDGE AVE		
Maining Address	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE A
	d Organization Affiliated Committee X .loint	t Fundraising Represent	ative Leadership PAC Si
Connected	d Organization Affiliated Committee Joint Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
Connected		t Fundraising Representa	ative Leadership PAC Sp
Connecter connec		t Fundraising Representa	Leadership PAC S
Connecter esignated Agent: Identify Full Name		t Fundraising Representa	Leadership PAC S
Connecter esignated Agent: Identify Full Name		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spanisher
Connecter esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material depositions are of Bank,	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi	.g . a. a		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	I Organization, Affiliated Committee, Joint Fund	Iraising Representativ	e, or Leadership PAC Spon
TEAM BUDDY			
Mailing Address	824 S. MILLEDGE AVE		
Mailing Address	SUITE 101		
	ATHENS	, GA	30605
Deletion dele			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identii		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	STATE	
esignated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identif	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	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 CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
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 Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundrais i			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e or Leadershin PAC Snon
KEAN VICTORY		along hoprosemative	, or readership i Ae open
	PO BOX 999		
Mailing Address			
	EDISON	NJ	08818
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Affiliated Committee Figure 1. Joint 1. Jo	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

(h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
lama of Any Connector	A Committee Affiliated Committee Laint Friedrich	raining Danyanantativ	a ay Laadayahin DAC Chan
NORTH TO THE	d Organization, Affiliated Committee, Joint Fundr FUTURE	aising nepresentative	e, or Leadership FAC Spons
Mailing Address	PO BOX 2814		
	SEWARD	, , , AK	99664
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
resignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or markets.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Lanks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identii 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 Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Sponsor
Mailing Address	1661 AARON BRENNER DR SUITE 300		
	MEMPHIS	TN	38120
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identif	fy by name, address (phone number – optional)		
Mailing Address	1		
Mailing Address			
Mailing Address			
	CITY A	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY ▲		
Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	CITY A	STATE ▲ Telephone Number	ZIP CODE A
TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank,	CITY A	STATE ▲ Telephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

1		FEC ID number	С
2.			
		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
MALLIOTAKIS VI	CTORY COMMITTEE		
Mailing Address	PO BOX 68		
	SOUTH SALEM	NY	10590
Relationship:	CITY d Organization	STATE ▲	ZIP CODE ▲ ative Leadership PAC Spo
Connected		STATE ▲ It Fundraising Represent	
Connected	d Organization Affiliated Committee		
Connecter Designated Agent: Identify	d Organization Affiliated Committee		
Connected Designated Agent: Identify Full Name	d Organization Affiliated Committee		
Connected Designated Agent: Identify Full Name	Affiliated Committee Join y by name, address (phone number – optional)		ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name Mailing Address	Affiliated Committee Join y by name, address (phone number – optional)		
Connected Designated Agent: Identify Full Name	Affiliated Committee Join y by name, address (phone number – optional) CITY	nt Fundraising Represent	Leadership PAC Spo

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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
WIN THE FUTUR	RE FUND		
Mailing Address	PO BOX 2485		
	SPRINGFIELD	VA VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identii Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of Early depository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	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 Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of Early depository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1		FEC ID number	C
2			
		FEC ID number	C
3.		FEC ID number	С
		FEC ID number	С
4			
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e. or Leadership PAC Spons
SOUTH JERSEY	_		·,
Mailing Address	C/O RED CURVE SOLUTIONS		
Mailing Address	138 CONANT STREET 2ND FLOOR		
			, 01915
	25/55/1/	Μ.Α.Λ.	Linuak
	BEVERLY	MA MA	
	CITY A	STATE ▲ Fundraising Representa	ZIP CODE A
Connected	CITY ▲ d Organization	STATE ▲	ZIP CODE A
Connected esignated Agent: Identify	CITY ▲ d Organization	STATE ▲	ZIP CODE A
Connected esignated Agent: Identify Full Name	CITY ▲ d Organization	STATE ▲	ZIP CODE A
Connected esignated Agent: Identify Full Name	CITY ▲ d Organization	STATE A Fundraising Representa	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address	CITY A d Organization Affiliated Committee y by name, address (phone number – optional)	STATE A Fundraising Representa	ZIP CODE ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	CITY A d Organization Affiliated Committee y Joint B y by name, address (phone number – optional) CITY A	STATE A Fundraising Representa	ZIP CODE Aative Leadership PAC Sp

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

or(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connecte BANKS VICTOR	d Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Represent	Leadership FAC Spons
Designated Agent: Ident	Affiliated Committee Joint ify by name, address (phone number – optional)	runaraising nepresent	Leadership FAC Spons
Designated Agent: Ident		rundraising hepresent	Leadership PAC Spons
Designated Agent: Ident		rundraising hepresent	Leadership PAC Spons
Designated Agent: Ident		rundraising hepresent	Leadership PAC Sporis
Designated Agent: Ident	ify by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)		
Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional) CITY CITY Tel ories: List all banks or other depositories in which t	STATE A	ZIP CODE A
Pull Name Full Name Mailing Address TITLE OR POSITION Banks or Other Depositing Safety depositing boxes or in Name of Bank, Depository, etc.	ify by name, address (phone number – optional) CITY CITY Tel ories: List all banks or other depositories in which t	STATE A	ZIP CODE A

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

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I			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
KIM VICTORY FU	JND		
Mailing Address	9460 TEGNER ROAD		
	HILMAR	CA	95324
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
estamated Amount Identify			
esignated Agent: Identify	by name, address (phone number – optional)		
	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 Mailing Address	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail ame of Bank,	CITY A Te ries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION Lianks or Other Deposito afety deposit boxes or mailane of Bank, depository, etc.	CITY A Te ries: List all banks or other depositories in which	elephone Number	

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1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
laws of Amy Composited	Ourselinstine Affiliated Occurring Laint Founda	elele e Democratation	a an Landauskin DAO On an
JACOBS VICTOR	Organization, Affiliated Committee, Joint Fundr Y COMMITTEE	aising Hepresentative	e, or Leadership PAC Spon
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, VA	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sp
	Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Page $\underline{\frac{172}{}}$ of $\underline{\frac{206}{}}$

Organization, Affiliated Committee, Joint Fu	FEC ID number FEC ID number FEC ID number FEC ID number	C
	FEC ID number	С
	FEC ID number	
	J	С
Organization, Affiliated Committee, Joint Fu		
Organization, Affiliated Committee, Joint Fu		
	ndraising Representative	e, or Leadership PAC Spons
RY COMMITTEE		
DO DOV 1100		
PO BOX 1488		
CRANBERRY TOWNSHIP	PA	16066
CITY ▲	STATE ▲	ZIP CODE ▲
by name, address (phone number – optional))	
▼ CITY ▲	STATE ▲	ZIP CODE ▲
	Telephone Number	
	CITY Organization Affiliated Committee by name, address (phone number – optional)	CRANBERRY TOWNSHIP CITY STATE Organization Affiliated Committee Joint Fundraising Representation by name, address (phone number – optional) CITY STATE STATE STATE STATE STATE STATE STATE Organization

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Page $\frac{173}{}$ of $\frac{206}{}$

ganization, Affiliated Committee, Joint II ND 332 W LEE HWY #303 WARRENTON	FEC ID number	r C r C
ganization, Affiliated Committee, Joint IND 332 W LEE HWY #303 WARRENTON	FEC ID numbe	r C
ganization, Affiliated Committee, Joint IND 332 W LEE HWY #303 WARRENTON	FEC ID numbe	r C
ganization, Affiliated Committee, Joint IND 332 W LEE HWY #303 WARRENTON		
332 W LEE HWY #303 WARRENTON	Fundraising Representa	tive, or Leadership PAC Spon
332 W LEE HWY #303 WARRENTON	Fundraising Representa	tive, or Leadership PAC Spon
332 W LEE HWY #303 WARRENTON		
#303 		
#303 		
#303 		
WARRENTON		
	VA VA	20186
CITY A	STATE	▲ ZIP CODE ▲
name, address (phone number – option	al)	
	1 1	1 1 1 1
	STATE A	ZIP CODE ▲
···· _		
	Telephone Number	
-	r name, address (phone number – optional	r name, address (phone number – optional) CITY STATE Telephone Number List all banks or other depositories in which the committee depositions of the committee deposition.

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

(h). Joint Fundraisi	•		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
GIMENEZ VICTO	DRY COMMITTEE		
	1 824 S MILLEDGE AVE STE 101		
Mailing Address			
	.=		20005
	ATHENS	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	Fundraising Represent	Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	Leadership PAC Sp
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	fy by name, address (phone number – optional) CITY	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	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	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi r			I FEC II	number	C
1.			_	number	
2.			_		C
3.			FEC II	number	C
4.			FEC II) number	C
		ted Committee, Joint F	undraising Rep	oresentative	e, or Leadership PAC Spon
BURGESS VICTO	ORY FUND				
Mailing Address	PO BOX 30844				
	BETHESDA			MD	20824
Relationship:		CITY A		STATE A	ZIP CODE ▲
			Joint Fundraising	g Representa	Leadership PAC S
				g Representa	Leadership PAC S
esignated Agent: Identif				g Representa	Leadership PAC S
esignated Agent: Identif				g Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (p	phone number – optiona	al)		
esignated Agent: Identif	y by name, address (p	phone number – optiona	al)	STATE A	
esignated Agent: Identif Full Name Mailing Address	y by name, address (p	phone number – optiona	al)	STATE A	
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or materials and the second	y by name, address (p	phone number – optiona	Telephone N	STATE A umber	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or make the second process of the sec	y by name, address (p	phone number – optiona	Telephone N	STATE A umber	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or materials and the second	y by name, address (p	phone number – optiona	Telephone N	STATE A umber	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or make the second position of Bank, epository, etc.	y by name, address (p	phone number – optiona	Telephone N	STATE A umber	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	C
4		FEC ID number	C
	Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Sponso
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identif	y by name, address (phone number - optiona	I)	
Full Name		,	
Full Name			
Mailing Address	CITY	STATE A	ZIP CODE A
	CITY		ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A vries: List all banks or other depositories in w	STATE A Telephone Number	
Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A vries: List all banks or other depositories in w	STATE A Telephone Number	

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

5(g) o	r(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected TIFFANY VICTOR	Organization, Affiliated Committee, Joint Fundrai	sing Representative	or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	1 Organization Affiliated Committee Joint F	undraising Representat	ive Leadership PAC Sponsor
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A		ZIP CODE A
8.	Full Name	CITY A	STATE ▲	ZIP CODE A
8.	Full Name	CITY A		
- 9.	Full Name Mailing Address TITLE OR POSITION	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲ phone Number	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲ phone Number	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲ phone Number	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲ phone Number	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲ phone 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 Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
-				
6. I		Organization, Affiliated Committee, Joint Fundra	nising Representative	e, or Leadership PAC Sponsor
	OHIO GOP MAJO	ORITY FUND		
	Mailing Address	499 S CAPITOL STREET SW		
	Mailing Address	#405		
		WASHINGTON	, DC	20003
	Relationship:	CITY ▲	STATE A	ZIP CODE A
			Fundraising Representa	
_	Connected	a Organization Affiliated Committee	Fundraising Represent	Leadership PAC Sponsor
8. [Designated Agent: Identify	by name, address (phone number – optional)		
8. [by name, address (phone number – optional)		
8. [Full Name	by name, address (phone number – optional)	1 1 1 1 1 1	
8. [by name, address (phone number – optional)		
8. [Full Name	by name, address (phone number – optional)		
8. [Full Name	by name, address (phone number – optional)		
8. (Full Name	CITY	STATE A	ZIP CODE A
8. [Full Name	CITY A	STATE A	
8. [Full Name	CITY A	1	
–	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
_ 9. !	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or maintenance.	CITY CITY Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
 9. §	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
 9. §	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors of the deposit boxes or main and the safety depos	CITY CITY Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
9. .	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor boxes or main and the company of the co	CITY CITY Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
9. .	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor boxes or main and the company of the co	CITY CITY Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦

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

Page $\frac{179}{}$ of $\frac{206}{}$

h). Joint Fundraisin		FEC ID number	
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
HERN VICTORY	FUND		
Mailing Address	8630 S PEORIA AVE		
	TULSA	OK	74132
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	d Organization Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depositions are of Bank,	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depositions are of Bank,	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc and	ries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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1.	g Participant:	, , , FEC	ID number	С
2.		 . , , FEC	ID number	C
			ID number	С
3.			ID number	C
4.			ID Humber	O .
ame of Any Connected	Organization, Affiliated Committee	, Joint Fundraising R	Representativ	e, or Leadership PAC Spon
MCMORRIS ROI	GERS WIN THE FUTURE	FUND		
	PO BOX 2485			
Mailing Address	1 0 000 2400			
	SPRINGFIELD		L VA ⊥	22152
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committ	ee X Joint Fundrais	ing Represent	ative Leadership PAC S
	Affiliated Committed by name, address (phone number		ing Represent	Leadership PAC S
esignated Agent: Identif			ing Represent	Leadership PAC S
esignated Agent: Identif			ing Represent	Leadership PAC S
esignated Agent: Identif		- optional)	ing Represent	Leadership PAC S
esignated Agent: Identif	by name, address (phone number	- optional)	STATE A	
esignated Agent: Identif Full Name Mailing Address	by name, address (phone number	- optional)	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	ries: List all banks or other depositor	- optional) Telephone	STATE A Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	ries: List all banks or other depositor	- optional) Telephone	STATE A Number	ZIP CODE A
esignated Agent: Identification Full Name	ries: List all banks or other depositor	- optional) Telephone	STATE A 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,	ries: List all banks or other depositor	- optional) Telephone	STATE A Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ries: List all banks or other depositor	- optional) Telephone	STATE A Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(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
	d Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
JEANNE VICTO	RY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee Joffy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	
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 anks or Other Deposite	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
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	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
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	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
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	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
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 ories: List all banks or other depositories in which	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 ories: List all banks or other depositories in which	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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	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 KEAN VICTORY	Organization, Affiliated Commit FUND	tee, Joint Fundrai	sing Representat	ive, or Leadership PAC Spons
Mailing Address	PO BOX 999			
Maining / Idanooc				
	EDISON		, NJ	, 08818
			STATE A	
Dolotionobing				▲ /IP CODE ▲
	d Organization Affiliated Commy by name, address (phone numb	nittee X Joint F	undraising Represe	
Connecte	d Organization Affiliated Comm	nittee X Joint F		
Connecte Pesignated Agent: Identif	d Organization Affiliated Comm	nittee X Joint F		
Connecte Designated Agent: Identif	d Organization Affiliated Comm	nittee X Joint F		
connecte resignated Agent: Identif	d Organization Affiliated Comm	nittee X Joint F		
connecte resignated Agent: Identif	Affiliated Commy by name, address (phone numb	nittee X Joint F		ntative Leadership PAC Sp
Connecte Designated Agent: Identification Full Name Mailing Address	Affiliated Commy by name, address (phone numb	er – optional)	undraising Represe	ntative Leadership PAC Sp

FEC Form 1S (Revised 02/2017) for Lir

n). Joint Fundraising	raiticipant.				
1.			F	EC ID number	С
2			F	EC ID number	C
3.			FI	EC ID number	С
4.			F	EC ID number	С
ame of Any Connected (Organization, Affiliated	Committee, Joint	Fundraising	g Representativ	re, or Leadership PAC Spo
OBERWEIS VICTO	DRY COMMITTE	E 			
Mailing Address	PO BOX 30844				
	BETHESDA			MD	20824
Relationship:		CITY A		STATE A	ZIP CODE ▲
				Iraising Represent	tative Leadership PAC S
Connected esignated Agent: Identify Full Name				raising Represent	tative Leadership PAC S
esignated Agent: Identify				raising Represent	tative Leadership PAC S
esignated Agent: Identify Full Name				raising Represent	tative Leadership PAC S
esignated Agent: Identify Full Name		one number – optio	nal)		tative Leadership PAC S
esignated Agent: Identify Full Name	by name, address (pho	one number – optio	nal)		
esignated Agent: Identify Full Name Mailing Address	by name, address (pho	one number – optio	nal)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai	by name, address (pho	one number – optio	nal)	STATE A	
Full Name Mailing Address TITLE OR POSITION	by name, address (pho	one number – optio	nal)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai	by name, address (pho	one number – optio	nal)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai ame of Bank, epository, etc.	by name, address (pho	one number – optio	nal)	STATE A	ZIP CODE A

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

5(g) or (h).	Joint Fundraising	Participant:			
1.				FEC ID number	С
2. [FEC ID number	С
3. [FEC ID number	С
4. [FEC ID number	С
		Organization, Affiliated Com		aising Representativ	e, or Leadership PAC Sponsor
N	Mailing Address	PO BOX 30844			
		BETHESDA		MD	20824
R	Relationship:	CIT	Y A	STATE A	ZIP CODE ▲
8. Design		Organization Affiliated Communication Affiliated Affiliated Communication Affiliated Affili		Fundraising Represent	ative Leadership PAC Sponso
Full					
i uii	I Name				
	iling Address				
Mai		CITY	A	STATE A	ZIP CODE A
Mai	iling Address	CITY		STATE A	ZIP CODE A
9. Banks safety of Deposit	iling Address	es: List all banks or other d	Te	lephone Number	ZIP CODE A ts funds, holds accounts, rents
9. Banks safety of Deposit	or Other Depositorideposit boxes or main of Bank, tory, etc.	es: List all banks or other d	Te	lephone Number	

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisin	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
		FEC ID number	С
4. []			
=	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
TEAM FITZ			
1			
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		t Fundraising Representa	ative Leadership PAC Sp
Connected	ed Organization Affiliated Committee	: Fundraising Representa	ative Leadership PAC Sp
Connected esignated Agent: Identify	ed Organization Affiliated Committee	E Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name	Affiliated Committee Joint y by name, address (phone number – optional)	t Fundraising Representation	
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee y Joint y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee y Joint y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8 a

. 1	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
STEEL VICTOR	Y FUND		
Mailing Address	9070 IRVINE CENTER DRIVE #150		
	IRVINE	CA	92618
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	fy by name, address (phone number – optional)	Trundraising Represente	Leadership PAC 5
esignated Agent: Identi		Trundraising nepresent	Leadership PAC 5
esignated Agent: Identi		Trundraising Represented	Leadership PAC 5
esignated Agent: Identi		Trundraising Represented	Leadership PAC 5
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: Identification Full Name Mailing Address	fy by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{^{187}}$ of $\underline{^{206}}$

1	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundraisi	ng Representative	e, or Leadership PAC Sponsor
Mailing Address	824 S MILLEDGE AVE STE 101		
Mailing Address			
	ATHENS	GA I	30605
Relationship:	CITY ▲	U STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint Fundament Joint Fund	ndraising Representa	ative Leadership PAC Sponse
Full Name			
Full Name			
Mailing Address	CITY A	STATE A	ZIP CODE A
	•	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	Telephories: List all banks or other depositories in which the	none Number	

FEC Form 1S (Revised 02/2017)

2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	l Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spons
TEAM JOYCE FO	OR PENNSYLVANIA		
Mailing Address	824 S MILLEDGE AVE		
. 3	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE ▲
		Fundraising Represent	ative Leadersnip PAC Spo
	fy by name, address (phone number – optional)	Fundraising Hepresent	Leadersnip PAC Spo
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identi		Fundraising Represent	Leadersnip PAC Spo
Pesignated Agent: Identi		Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Idention Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
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Pesignated Agent: Idention Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the control of the control	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the property of the propert	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the property of the propert	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for

n). Joint Fundraising	,					
1.				FEC ID number	С	
2				FEC ID number	С	
3.				FEC ID number	С	
4.				FEC ID number	C	
ame of Any Connected (int Fundrais	sing Representati	ve, or Leadership	PAC Spor
BIG DAN RODIME	R VICTORY C	OMMITTEE				
Mailing Address	50 S JONES BLVD	STE 201				
	LAS VEGAS			NV NV	89107	
Relationship:		CITY A		STATE A	ZIP	CODE A
Connected	Organization Af	filiated Committee	X Joint Fu	undraising Represen	ntative Leade	ership PAC S
esignated Agent: Identify				undraising Represen	tative Leade	ership PAC S
esignated Agent: Identify Full Name				undraising Represen	tative Leade	ership PAC S
esignated Agent: Identify				undraising Represen	tative Leade	ership PAC S
esignated Agent: Identify Full Name				undraising Represen		
esignated Agent: Identify Full Name Mailing Address	by name, address (p		otional)			
esignated Agent: Identify Full Name	by name, address (p	ohone number – op	otional)			
esignated Agent: Identify Full Name Mailing Address	by name, address (p	ohone number – op	otional)	STATE A	ZIP (CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or main fame of Bank,	by name, address (p	ohone number – op	otional)	STATE A	ZIP (CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, address (p	ohone number – op	otional)	STATE A	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
ame of Any Connector	I Organization, Affiliated Committee, Joint Fund	reining Depresentative	o or Londovokin DAC Snon
HOUSE VICTOR			
Mailing Address	2318 CURTIS STREET		
	1		
	DENVER	, , , , CO ,	80205
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
_	ed Organization Affiliated Committee	t Fundraising Representa	Leadership FAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Trundialsing nepresent	Leadership PAC Sp
esignated Agent: Identi		Trundraising nepresent	Leadership FAC S
esignated Agent: Identi		Trundraising nepresent	Leadership FAC 5
esignated Agent: Identi		Trundraising nepresent	Leadership FAC 5
esignated Agent: Identi		Trundraising Representa	Leadership FAC S
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 Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	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 Telepories: List all banks or other depositories in which	STATE A	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 Telepories: List all banks or other depositories in which	STATE A	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 Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

5(g) c	or(h). Joint Fundraisin g	յ Participant։		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	=	Organization, Affiliated Committee, Joint Fundrai	ising Representativ	e, or Leadership PAC Sponsor
	NANCY MACE VIO	CTORY FUND		
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
		ALEXANDRIA	, , , VA ,	22314
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name			
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		
	Full Name Mailing Address	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mailing Name of Bank,	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mail Name of Bank, Depository, etc.	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
8.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mail Name of Bank, Depository, etc.	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	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	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
VICTORIA VICTO	ORY FUND		
1			
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	nt Fundraising Represent	Leadership PAC Sp
		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	nt Fundraising Representa	
esignated Agent: Identif Full Name Mailing Address	fy by name, address (phone number – optional)	st Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) (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
6.		Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	3103 JULIAN GLEN CIR		
		WAXHAW	NC	28173
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tel	lephone Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which t intains funds.	the committee deposit	s funds, holds accounts, rents
	Depository, etc.	1		
	Mailing Address			

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi r	ig Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected MIKE GARCIA VI	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
WIRE GARCIA VI	-		
Mailing Address	9070 IRVINE CENTER DRIVE #150		
Ü			
	IRVINE	, CA	92618
Relationship:	CITY ▲	STATE A	ZIP CODE A
			_
	d Organization Affiliated Committee X Jointy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mailing and grants of Bank, depository, etc.	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mailing and grants of Bank, depository, etc.	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundrais		FEC ID number	С
		FEC ID number	С
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
JERRY CARL VI	CTORY COMMITTEE		
 , , , , , , , , ,			
	PO BOX 852138		
Mailing Address			
	MOBILE	AL	36685
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional) CITY		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional) CITY Te	STATE A elephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of the content of the	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A elephone 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.	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A elephone 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.	ify by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
=	d Organization, Affiliated Committee, Joint Fundr IOINT FUNDRAISING COMMITTEE	raising Representative	e, or Leadership PAC Spor
Mailing Address	370 EAST SOUTH TEMPLE STE 580		
Ü			
	SALT LAKE CITY	ı ıUTı	84111
Relationship:	CITY A	STATE A	ZIP CODE A
		t Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number - optional)		ative Leadership PAC S
Full Name	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	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name Mailing Address TITLE OR POSITION	CITY A	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ Te ories: List all banks or other depositories in which	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mail to the control of the control	CITY ▲ CITY ▲ Te ories: List all banks or other depositories in which	elephone Number	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲ CITY ▲ Te ories: List all banks or other depositories in which	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank, epository, etc.	CITY ▲ CITY ▲ Te ories: List all banks or other depositories in which	elephone Number	ZIP CODE A

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h). Joint Fundraisi	ig i artioipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected TEAM NICK	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Mailing Address	824 S. MILLEDGE AVE.		
ag / taa. ooo	STE. 101		
	ATHENS	, GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE A
rielationship.	CITY A	SIAIE	ZIP CODE A
	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	st Fundraising Represent	
esignated Agent: Identif	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name _ _ Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
esignated Agent: Identification Full Name _ _ Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification 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 Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
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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 Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
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 Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines

g) or (h). Joint Fundraisin	Participant:			
1.		FE0	C ID number	С
2.		FEC	C ID number	C
3.		 	C ID number	C
4.		FE(C ID number	С
Name of Any Connected PFLUGER VICTO	Organization, Affiliated Committee,	Joint Fundraising	Representativ	e, or Leadership PAC Sponsor
LILILIA III	KT FUND			
Mailing Address	PO BOX 30844			
	BETHESDA		_ MD	20824
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
i iolationoliip.				
Connected	Organization Affiliated Committee		ising Represent	ative Leadership PAC Sponso
Connected			ising Represent	ative Leadership PAC Sponso
Designated Agent: Identify	Organization Affiliated Committee		ising Represent	ative Leadership PAC Sponso
Designated Agent: Identify Full Name	Organization Affiliated Committee		ising Represent	ative Leadership PAC Sponso
Designated Agent: Identify Full Name	Organization Affiliated Committee	optional)	ising Represent	ative Leadership PAC Sponso
Designated Agent: Identify Full Name	Organization Affiliated Committee	optional)		
Designated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee	optional)		
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank,	Organization Affiliated Committee by name, address (phone number – CITY CITY ies: List all banks or other depositor	optional) Telephon	STATE A	ZIP CODE A
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	Organization Affiliated Committee by name, address (phone number – CITY CITY ies: List all banks or other depositor	optional) Telephon	STATE A	ZIP CODE A
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank,	Organization Affiliated Committee by name, address (phone number – CITY CITY ies: List all banks or other depositor	optional) Telephon	STATE A	ZIP CODE A
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	Organization Affiliated Committee by name, address (phone number – CITY CITY ies: List all banks or other depositor	optional) Telephon	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi r	1	FEO ID	С
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
NEHLS VICTOR	(
Mailing Address	1612 CRABB RIVER RD		
	RICHMOND	TX	77469
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 51522		
	AMARILLO	, , TX	79159
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	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	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
- 6. N		Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	12000 STARCREST DR		
		SAN ANTONIO	, , TX ,	, 78247
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected		undraising Representa	
_				
- 3. C	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
3. C		by name, address (phone number – optional)		
- 3. С	Full Name	by name, address (phone number – optional)		
 3. C	Full Name	CITY A		ZIP CODE A
- 8. C	Full Name	CITY A	STATE A	ZIP CODE A
_ Э. E	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tele ies: List all banks or other depositories in which the	STATE ▲ phone Number	ZIP CODE 🛦
— S S	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tele ies: List all banks or other depositories in which the	STATE ▲ phone Number	ZIP CODE 🛦
— 9. E 8	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor of Banks or main Name of Bank,	CITY CITY Tele ies: List all banks or other depositories in which the	STATE ▲ phone Number	ZIP CODE 🛦
– 9. E 8	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor bases or main safety deposit boxes or main safety depository, etc.	CITY CITY Tele ies: List all banks or other depositories in which the	STATE ▲ phone Number	ZIP CODE A
– 9. E 8	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor bases or main safety deposit boxes or main safety depository, etc.	CITY CITY Tele ies: List all banks or other depositories in which the	STATE ▲ phone Number	ZIP CODE A

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.		FEC ID number	C
1.		_	
2.		FEC ID number	
3.		FEC ID number	
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint I	Fundraising Representati	ve, or Leadership PAC Spon
SHEDD VICTOR	Y FUND		
Mailing Address	PO BOX 365		
	MCLEAN	VA VA	22101
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Joint Fundraising Represe	ntative Leadership PAC S
ocianated Agent: Identif	y by name address (phone number ention	ol)	
esignated Agent: Identif	y by name, address (phone number – option	al)	
	y by name, address (phone number – option	al)	
Full Name	y by name, address (phone number – option	al)	
Full Name	CITY A		ZIP CODE A
Full Name	CITY A		
Full Name Mailing Address TITLE OR POSITION Anks or Other Deposited deposit boxes or mails are of Bank,	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposited deposit boxes or mail are of Bank,	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or main and the property of the prop	CITY A	STATE A Telephone Number	ZIP CODE A

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5(g)	or(h). Joint Fundraising	g 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 Fundrais	sing Representativ	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 21315		
		OKLAHOMA CITY	OK	73156
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	undraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
		CITY ▲	STATE A	ZIP CODE A
	TITLE OR POSITION	V GITT Z	SIAIL	ZIF CODE A
		Telep	phone Number	
9.				
	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositories in which the intains funds.	e committee deposi	ts funds, holds accounts, rents
	Name of Bank, Depository, etc.		e committee deposi	ts funds, holds accounts, rents
	safety deposit boxes or mai		e committee deposi	ts funds, holds accounts, rents
	Name of Bank, Depository, etc.		e committee deposi	ts funds, holds accounts, rents

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
ISSA VICTORY I	-UND 		
Mailing Address	9070 IRVINE CENTER DRIVE		
Mailing Address	SUITE 150		
	IRVINE	, CA	92618
Relationship:	CITY ▲	STATE A	ZIP CODE A
rielationship.			
	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
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Page $\frac{205}{}$ of $\frac{206}{}$

h). Joint Fundraisi n	g Participant:				
1.			FEC ID number	C	Ξ
2.			FEC ID number	C	Ξ
3.			FEC ID number	C	
4.			FEC ID number	С	_
ame of Any Connected	Organization, Affiliated Committee, Jo	oint Fundrais	ing Representativ	ve, or Leadership PAC Sp	pons
<u> </u>		· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>	<u> </u>
	75 S HIGH ST				
Mailing Address					
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	DUBLIN	<u> </u>	OH	43017	
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Mailing Address	228 S. WASHINGTON STREET		
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	ALEXANDRIA	VA	22314
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