Image# 202506129762149411				PAGE 1 / 16
FEC FORM 1	STATEME ORGANIZ			
				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Illinois Republican	Party - Federal			
ADDRESS (number and street)	PO Box 64897			
(Check if address is changed)				
	Chicago			0664-0897
	CITY ▲		STATE ▲	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE				
<ul> <li>(Check if address is changed)</li> </ul>	tcdatwyler@gmail.com			
	Optional Second E-Mail Ad	dress		
(Check if address is changed)				
2. DATE 06 / 12				
3. FEC IDENTIFICATION NU		00005926		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined th	nis Statement and to the best	of my knowledge and belief	it is true, correct ar	nd complete.
		,	· · · · · <b>,</b> · · · · · ·	
Type or Print Name of Treasure	r <u>Reyes, Jay, , ,</u>			
Signature of Treasurer Reye	es, Jay, , ,		Date 06	/ D D / Y Y Y 12 / 2025
NOTE: Submission of false, errone		may subject the person signing TION SHOULD BE REPORTE		e penalties of 52 U.S.C. §30
Office Use		For further information Federal Election Commis Toll Free 800-424-9530	contact:	FEC FORM 1 (Revised 06/2012)
Only		Local 202-694-1100		

06/12/2025 21 : 27

	n 1 (Revised 03/2022)		Page <b>2</b>
TYPE	OF COMMITTEE:		
Cand	lidate Committee:		
(a)	This committee is a principal	campaign committee. (Complete the candidate inform	ation below.)
(b)	This committee is an authoriz information below.)	zed committee, and is NOT a principal campaign com	mittee. (Complete the candidate
	ne of didate		
	didate ty Affiliation	Office Sought: House Senate	State President District
(c)	This committee supports/oppo	oses only one candidate, and is NOT an authorized c	
	ame of andidate		
Party	Committee:		
<sup>(d)</sup> >	This committee is a ST	TA (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
	cal Action Committee (PAC	C):	
Politi			
Politi (e)		e segregated fund. (Identify connected organization on	line 6.) Its connected organization is a:
		Corporation w/o Capital Stock	line 6.) Its connected organization is a:
	This committee is a separate	Corporation w/o Capital Stock	
	This committee is a separate Corporation Membership Organization	Corporation w/o Capital Stock	Labor Organization
	This committee is a separate Corporation Membership Organization	Corporation w/o Capital Stock Trade Association mmittee is a Lobbyist/Registrant PAC. oses more than one Federal candidate, and is NOT a	Labor Organization Cooperative

(g)	This committee is an inc	dependent expenditure-only	political committee (Super PAC)
(9)			

	In	addition,	this	committee	is	а	Lobbyist/Registrant PAC.
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(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

In addition, this committee is a Lobbyist/Registrant PAC.

## Joint Fundraising Representative:

(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
 Committees Participating in Joint Fundraiser
 1.
 2.

	FEC Form 1 (Revised 0	)2/2009)																							Paç	ge <b>3</b>		
W	rite or Type Committee Name																											
	Illinois Republica	an Party	- F	ed	ler	al																						
Э.	Name of Any Connected O	rganization, A	ffilia	ted	Cor	nmi	ttee	e, Jo	oin	t F	uno	drai	isin	g F	Rep	res	en	tati	ve,	or	Lea	Ide	rshi	ip F	νAC	Spo	onsc	or
	Republican National	Committee																	1									
	Mailing Address	310 1st St SE																										
		Washington															Ľ	C			20	003	-188	35				
					С	ITY										S	STA	ΤE					Z	IP (	cor	DE 🖌	•	

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

	Reyes, Jay,	, ,																									
Full Name																											
Mailing Address		PO Bo	x 648	97																							
		Chicag	jo I													IL			Ľ	6066	64-0 	0897	, 	] – [			
						СП	ΓY .								S	TAT	Έ	•				ZIF	Р С	ODE	Ξ 🔺		
Title or Position $\mathbf{v}$	,																										
Treasurer											Tele	epho	one	nu	mbe	ər	L	71	15			338	<b>}</b>	] – [	8	544	

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Reyes, Jay, , ,
of Treasurer	
Mailing Address	PO Box 64897
	Chicago         IL         60664-0897
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Telephone number     715     338     8544

FEC Form 1	(Revised 02/2009) Page <b>4</b>	•
Full Name of Designated Agent	Datwyler, Thomas, , ,	
Mailing Address	PO Box 183	
	Hudson WI 54016	
	CITY ▲ STATE ▲ ZIP CODE	•
Title or Position	▼	
Assistant Treasur	rer Telephone number715338	8544

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Fifth Th	ird Bank		
Mailing Address	38 Fountain Square Plaza		
	Cincinnati	OH 45263	· · · · · - [ · · · · · · · · · · · · ·
	CITY A	STATE ▲	ZIP CODE
Name of Bank, Depository,	etc.		
Chain B	Bridge Bank		
Mailing Address	1445A Laughlin Ave		
	McLean	VA 22101	
	CITY A	STATE A	ZIP CODE

1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
-	ted Organization, Affiliated Committee, Joint Fund D STATE VICTORY COMMITTEE	draising Representativ	e, or Leadership PAC Sponso
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA		22314
Relationship:		STATE A	
riolationionip.	•••• <u> </u>		
Conne		nt Fundraising Represent	tative Leadership PAC Spor
Conne	ected Organization X Affiliated Committee Joi	nt Fundraising Represent	tative Leadership PAC Spor
Designated Agent: Ide	ected Organization X Affiliated Committee Joi	nt Fundraising Represent	tative Leadership PAC Spor
Designated Agent: Ide	ected Organization X Affiliated Committee Joi	nt Fundraising Represent	tative Leadership PAC Spon
Designated Agent: Ide	ected Organization X Affiliated Committee Joi	nt Fundraising Represent	tative Leadership PAC Spon
Conne Designated Agent: Ide Full Name	ected Organization Affiliated Committee Joi	nt Fundraising Represent	tative Leadership PAC Spor
Designated Agent: Ide	ected Organization Affiliated Committee Joi		

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5(g) or	r(h). Joint Fundraising	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	Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	Rodney Illinois Victory	/ Fund		
	Mailing Address	499 S Capitol St SW		
		Ste 407		
		Washington		20003-4016
	Relationship:		STATE A	ZIP CODE
-	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8. <b>C</b>	Designated Agent: Identify	by name, address (phone number - optional)		
8. <b>[</b>	Designated Agent: Identify	by name, address (phone number – optional)		
8. <b>[</b>		by name, address (phone number - optional)		
8. <b>C</b>	Full Name	by name, address (phone number - optional)		
8. <b>[</b>	Full Name	by name, address (phone number – optional)		
8. <b>[</b>	Full Name			
8. <b>[</b>	Full Name		I I I I I I I I I I I I I I I I I I I	
9. <b>E</b>	Full Name		lephone Number	
9. <b>E</b> S	Full Name Mailing Address TITLE OR POSITION		lephone Number	
9. <b>E</b> S	Full Name		lephone Number	
9. <b>E</b> S	Full Name          Mailing Address         TITLE OR POSITION            Banks or Other Depositor         safety deposit boxes or ma         Name of Bank,       Truist         Depository, etc.		lephone Number	
9. <b>E</b> S	Full Name          Mailing Address         TITLE OR POSITION            Banks or Other Depositor         safety deposit boxes or ma         Name of Bank,       Truist         Depository, etc.		lephone Number	

-EC	Form	1S	(Revised	02/2017)
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		Participant:						
1.					FEC ID number	С		
2.					FEC ID number	С		
3.					FEC ID number	С		
4.					FEC ID number	С		
Nome	of Any Connected C	Affiliat		int Fundraia	ing Denvecenteti		wahin DAC C	
	e Back the House	-				ve, or Leade	ersnip PAC Sp	porisor
Ν	Mailing Address	PO Box 30844						
		Bethesda			MD	20824	-0844	
F	Relationship:		CITY A		STATE A		ZIP CODE	
	Connected	Organization X Af	iliated Committee	Joint Fu	ndraising Represen	tative	Leadership PAC	C Sponso
Design	nated Agent: Identify	by name, address (p	hone number – op	tional)				
_	nated Agent: Identify	by name, address (p	hone number – op	tional)				1 1 1
Ful		by name, address (p	hone number – op	tional)				1 1 1
Ful	II Name	by name, address (p	hone number – op	tional)				
Ful	II Name	by name, address (p	hone number – op	tional)				
Ful Ma	II Name		hone number – op	tional)				
Ful Ma	II Name				· · · · · · · · · · · · · · · · · · ·			
Ful Ma	II Name							
Ful Ma TI	II Name			Telep	hone Number			
Ful Ma TI 	II Name			Telep	hone Number			                 
Ful Ma Ti Banks safety	II Name			Telep	hone Number			                 rents
Ful Ma TI Banks safety o Name o Deposi	Il Name			Telep	hone Number			<pre></pre>
Ful Ma TI Banks safety o Name o Deposi	Il Name			Telep	hone Number			<pre></pre>
Ful Ma TI Banks safety o Name o Deposi	Il Name			Telep	hone Number			<pre></pre>

5(g) or (ł	n). Joint Fundraising	Participant:	
	1.		FEC ID number
	2.		FEC ID number
	3.		FEC ID number
	4.		FEC ID number
6. <b>N</b> a	ame of Any Connected (	Drganization, Affiliated Committee, Joint Fundra	aising Representative, or Leadership PAC Sponsor
I		D	
l			
	Mailing Address	824 S Milledge Ave	
		Ste 101	
		Athens	GA 30605
	Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representative
8. <b>De</b>	Full Name	by name, address (phone number - optional)	
	Mailing Address		
	TITLE OR POSITION		STATE A ZIP CODE A
			lephone Number
	anks or Other Depositori fety deposit boxes or mai		the committee deposits funds, holds accounts, rents
	ame of Bank, epository, etc.		
	Mailing Address		
			STATE ▲ ZIP CODE ▲

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5(g) or (h)	). Joint Fundraising	Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4		FEC ID number	C
6. <b>Na</b>	me of Any Connected (	Drganization, Affiliated Committee, Joint Fundrai	sing Representative	, or Leadership PAC Sponsor
L				
	Mailing Address	9501 W 144TH PL		
				60462
	Relationship:	CITY 🔺	STATE A	ZIP CODE
8. <b>De</b> s		by name, address (phone number - optional)		
8. <b>De</b> :	Full Name	by name, address (phone number – optional)		
8. <b>De</b> s		by name, address (phone number - optional)		
8. <b>De</b> :	Full Name	by name, address (phone number - optional)		
8. <b>De</b> :	Full Name			
8. De:	Full Name			
8. <b>De</b> :	Full Name		STATE	
9. <b>Ba</b>	Full Name	CITY ▲ CITY ▲ Tele	ephone Number	
9. <b>Ba</b> i safe Nat	Full Name	CITY ▲ CITY ▲ Tele	ephone Number	
9. <b>Ba</b> i safe Nat	Full Name Mailing Address TITLE OR POSITION T  Inks or Other Depositori fety deposit boxes or mail me of Bank,	CITY ▲ CITY ▲ Tele	ephone Number	
9. <b>Ba</b> i safe Nat	Full Name	CITY ▲ CITY ▲ Tele	ephone Number	
9. <b>Ba</b> i safe Nat	Full Name	CITY ▲ CITY ▲ Tele	ephone Number	

	· · · · · · · · · · · · · · · · · · ·	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 (	Drganization, Affiliated Committee, Join	nt Fundraising R	epresentative	e, or Leade	rship PAC Spon	sor
ES							
		1 824 S MILLEDGE AVE					
I	Mailing Address						
		SUITE 101					
		ATHENS		GA	30605		
I	Relationship:	CITY 🔺		STATE A		ZIP CODE	
	Connected	Organization Affiliated Committee	imes Joint Fundrais	ing Representa	ative L	eadership PAC S	ponsor
Fu	III Name						
Ma	ailing Address						
Ma	ailing Address						
Ma	ailing Address						
	ailing Address ITLE OR POSITION			  STATE ▲			
			Telephone				
			Telephone				
T  Banks	TLE OR POSITION	▼		Number			L
T  Banks	itle or position	▼		Number			     ts
T Banks safety Name	TLE OR POSITION	▼ ies: List all banks or other depositories i ntains funds.		Number	s funds, hol	ds accounts, ren	ts
T Banks safety Name	TILE OR POSITION	▼ ies: List all banks or other depositories i ntains funds.	n which the com	Number	s funds, hol	ds accounts, ren	ts
T Banks safety Name	TLE OR POSITION	▼ ies: List all banks or other depositories i ntains funds.	n which the com	Number	s funds, hol	ds accounts, ren	ts
T Banks safety Name	TLE OR POSITION	▼ ies: List all banks or other depositories i ntains funds.	n which the com	Number	s funds, hol	ds accounts, ren	ts

5(g) or (	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
6. <b>N</b>	lama of Any Connected	Organization Affiliated	Committee Joint Fun	draining Depresentative	e, or Leadership PAC Sponsor
0. N	The Firewall Project	Organization, Annateu	Commutee, Joint Fun	diaising nepresentative	, or Leadership FAC Sponsor
	Mailing Address	PO Box 183			
		Hudson		WI	54016
	Relationship:		CITY A	STATE 🔺	ZIP CODE
	Connected	Organization Affilia	ted Committee	int Fundraising Representa	tive Leadership PAC Sponsor
8. D	esignated Agent: Identify	by name, address (pho	ne number – optional)		
8. <b>D</b>	esignated Agent: Identify	by name, address (pho	ne number - optional)		
8. D		by name, address (pho	ne number – optional)		
8. D	Full Name	by name, address (pho	ne number – optional)		
8. D	Full Name	by name, address (pho	ne number – optional)		
8. D	Full Name		ne number – optional)		
8. D	Full Name			└ · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
_	Full Name			Telephone Number	
9. <b>B</b>	Full Name			Telephone Number	
9. <b>B</b> Sa N	Full Name Mailing Address TITLE OR POSITION			Telephone Number	
9. <b>B</b> Sa N	Full Name          Mailing Address         TITLE OR POSITION            anks or Other Depositor         afety deposit boxes or ma         ame of Bank,         epository, etc.			Telephone Number	
9. <b>B</b> Sa N	Full Name Mailing Address TITLE OR POSITION			Telephone Number	
9. <b>B</b> Sa N	Full Name          Mailing Address         TITLE OR POSITION            anks or Other Depositor         afety deposit boxes or ma         ame of Bank,         epository, etc.			Telephone Number	

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5(g) or (h	n). Joint Fundraising	Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	C
		Drganization, Affiliated Committee, Joint Fundra	aising Representative	, or Leadership PAC Sponsor
L		SE 2024		
L				
	Mailing Address	PO Box 30844		
		Bethesda		20824
	Relationship:		STATE A	
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8. <b>De</b>	esignated Agent: Identify	by name, address (phone number - optional)		
8. <b>De</b>	Full Name	by name, address (phone number - optional)		
8. <b>De</b>		by name, address (phone number - optional)		
8. <b>De</b>	Full Name	by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
8. De	Full Name			
8. De	Full Name		Iephone Number	
	Full Name		lephone Number	
9. <b>Ba</b>	Full Name		lephone Number	
9. <b>Ba</b> sat	Full Name		lephone Number	
9. <b>Ba</b> sat	Full Name Mailing Address TITLE OR POSITION T  anks or Other Depositori fety deposit boxes or main ame of Bank,		lephone Number	
9. <b>Ba</b> sat	Full Name          Mailing Address         TITLE OR POSITION         anks or Other Depositori         fety deposit boxes or main         ame of Bank,         epository, etc.		lephone Number	
9. <b>Ba</b> sat	Full Name          Mailing Address         TITLE OR POSITION         anks or Other Depositori         fety deposit boxes or main         ame of Bank,         epository, etc.		lephone Number	

L

5(g) or	(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	C
- 6. <b>1</b>	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	GROW THE MAJORI			· · ·
	Mailing Address	228 S WASHINGTON ST STE 115		
				22314
	Relationship:	CITY A	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
- 8. <b>C</b>	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		1		
	TITLE OR POSITION		STATE A	
			lephone Number	-   -
_				
9. E				
5. L	Banks or Other Depositor	ies: List all banks or other depositories in which t intains funds.	the committee deposite	s funds, holds accounts, rents
s	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositories in which t intains funds.	the committee deposits	s funds, holds accounts, rents
s	safety deposit boxes or mai Name of Bank, Depository, etc.	ies: List all banks or other depositories in which the intains funds.		s funds, holds accounts, rents
s	safety deposit boxes or mai Name of Bank,	ies: List all banks or other depositories in which t intains funds.		s funds, holds accounts, rents
s	safety deposit boxes or mai Name of Bank, Depository, etc.	ies: List all banks or other depositories in which the intains funds.		s funds, holds accounts, rents
s	safety deposit boxes or mai Name of Bank, Depository, etc.	ies: List all banks or other depositories in which t intains funds.	the committee deposits	s funds, holds accounts, rents

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

ZIP CODE

STATE 🔺

ō(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	C
4.			FEC ID number	С
	of Any Connected O	rganization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
Ν	Mailing Address	228 S WASHINGTON ST		
		STE 115		
			VA	22314
F	Relationship:		STATE A	
	Connected C	Drganization Affiliated Committee X Joint Fu	undraising Representa	ative Leadership PAC Sponsor
-	nated Agent: Identify b	y name, address (phone number - optional)		
Ful	II Name	y name, address (phone number - optional)		
Ful		y name, address (phone number - optional)		
Ful	II Name	y name, address (phone number - optional)		
Ful	II Name			
Ful	II Name			<pre></pre>
Ful	II Name		STATE A	
Ful Ma 71 9. <b>Banks</b> safety Name	II Name ailing Address ITLE OR POSITION ▼  or Other Depositorie deposit boxes or main of Bank,	CITY ▲ CITY ▲ Telep	phone Number	s funds, holds accounts, rents
Ful Ma 71 9. <b>Banks</b> safety Name	II Name ailing Address ITLE OR POSITION ▼  or Other Depositorie deposit boxes or main		phone Number	s funds, holds accounts, rents
Ful Ma TI Deposi	II Name ailing Address ITLE OR POSITION ▼  or Other Depositorie deposit boxes or main of Bank,	CITY ▲ CITY ▲ Telep	phone Number	s funds, holds accounts, rents

Joint Fundraising	g Participant.						
				FEC ID number	С		
				FEC ID number	С		
				FEC ID number	С		
				FEC ID number	С		
of Any Connected (	Organization, Af	filiated Committee, Joint	Fundraisi	ng Representative	, or Lea	dership PAC	Sponsor
MP 47 COMMITT	EE, INC.						
ailing Address	P.O. BOX 509						
	ARLINGTON						
elationship:		CITY 🔺		STATE		ZIP COD	
Connected	Organization	Affiliated Committee	× Joint Fur	ndraising Representa	tive	Leadership	PAC Sponso
Name							
ing Address							
	-			STATE A		ZIP CODE	E 🔺
		1	Tolon	hono Numbor		-	
			Telep				
or Other Depecitor	ing, List all bank	e er ether depesitories in	which the	committee denosit	fundo		ita ranta
or Other Depositor eposit boxes or mai	<b>ies:</b> List all bank ntains funds.	s or other depositories in	which the	committee deposite	s funds, I	holds accour	its, rents
or Other Depositor eposit boxes or mai f Bank, ory, etc.	ies: List all bank ntains funds.	s or other depositories in	which the	committee deposit	s funds,	holds accour	its, rents
eposit boxes or mai f Bank, <sub>I</sub>	ies: List all bank ntains funds.	s or other depositories in	which the		s funds,   	holds accour	its, rents
eposit boxes or mai f Bank, pry, etc.	ies: List all bank ntains funds.	s or other depositories in	which the		s funds,   	holds accour	Its, rents
eposit boxes or mai f Bank, pry, etc.	ies: List all bank Intains funds.	s or other depositories in	which the		s funds,           	holds accour	hts, rents
	MP 47 COMMITT	MP 47 COMMITTEE, INC.	MP 47 COMMITTEE, INC.	f Any Connected Organization, Affiliated Committee, Joint Fundraisi   mP 47 COMMITTEE, INC.     ailing Address     P.O. BOX 509     Image: Class of the second seco	MP 47 COMMITTEE, INC.	FEC ID number   P.O. BOX 509   ARLINGTON            Article A gent: Identify by name, address (phone number – optional) Name    Andress    ARD Address   ARD Address   CITY A STATE A  CITY A STATE A	FEC ID number   FEC ID number   FEC ID number   C   MIP 47 COMMITTEE, INC.      P.O. BOX 509 Hationship: CITY ▲  STATE ▲  ZIP COE  Le OR POSITION ▼ CITY ▲  CITY ▲  STATE ▲  ZIP COE

5(g) or (h)	Joint Fundraising	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
6. <b>Na</b> i	me of Any Connected (	Drganization, Affiliated Committee, Joint Fundrais	sing Representative	or Leadershin PAC Sponsor
		ZPATRICK MALLIOTAKIS (CLFM) VICTORY		
L				
L				
	Mailing Address	PO B0X 26141		
				22313
	Relationship:	CITY A	STATE	
	Connected	Organization Affiliated Committee X Joint Fi	undraising Representa	tive Leadership PAC Sponsor
8. <b>Des</b>	signated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION		STATE A	ZIP CODE
			phone Number	
Sale	nks or Other Depositori ety deposit boxes or mai	es: List all banks or other depositories in which the nation funds.	e committee deposit	s funds, holds accounts, rents
Nar			e committee deposit	s funds, holds accounts, rents
Nar	ety deposit boxes or main me of Bank,		e committee deposit	s funds, holds accounts, rents
Nar	ety deposit boxes or main me of Bank, pository, etc.		e committee deposit:	s funds, holds accounts, rents
Nar	ety deposit boxes or main me of Bank, pository, etc.		e committee deposit:	s funds, holds accounts, rents