FEC

Only

STATEMENT OF **ORGANIZATION**

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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 ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address kdavis@hdafec.com is changed) Optional Second E-Mail Address kwilliams@nrcc.org COMMITTEE'S WEB PAGE ADDRESS (URL) www.nrcc.org (Check if address is changed) DATE 2024 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. Type or Print Name of Treasurer Davis, Keith A.,, Date 02 15 2024 Signature of Treasurer Davis, Keith A., , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	ge 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidatinformation below.)	ate
Name of Candidate	
Candidate Office Sought: House Senate President	-
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	ct
Name of Candidate	
Party Committee: (d) This committee is a NAT (National, State or subordinate) committee of the REP (Democratic, Republican, etc.) Party Committee:	ırty
Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	zation is a:
Corporation Corpor	on
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 segregated fund or	r nartv
committee. (i.e., nonconnected committee)	ραιτγ
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more p committees/organizations, at least one of which is an authorized committee of a federal candidate.	olitical
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more p committees/organizations, none of which is an authorized committee of a federal candidate.	olitical
Committees Participating in Joint Fundraiser	
1	

	FEC Form 1 (Revised 0)	2/2009)	Page 3
٧	/rite or Type Committee Name		
	NRCC		
ô.	-	ganization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
	COLE COMBINED C	OMMITTEE	
	Mailing Address	12176 CHANCERY STATION CIRCLE	
		RESTON VA 1	20190
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the person in p	ossession of committee
	Davis, Keith	n A., , ,	
	Full Name		
	Mailing Address	320 First Street SE	
		1	
		Washington	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	3,,,,,	
	Treasurer	Telephone number	_ 479 7000
8.	Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and ssistant treasurer).	the name and address of
	Full Name Davis, Keith	n A., , ,	
	of Treasurer	₁ 320 First Street SE	
	Mailing Address	320 Tilst Sileet SE	
		Washington DC 2	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	479 7000

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent Mailing Address	Williams, Katy, , , 320 First Street SE Washington	DC	20003
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasur		number 2	202 - 479 - 7000
	Depositories: List all banks or other depositories in which the comness or maintains funds.	nittee deposits t	funds, holds accounts, rents
Name of Bank, D	epository, etc.		
Mailing Address	Wells Fargo 1753 Pinnacle Drive McLean CITY	VA VA	22102
	OH F	SIAIE	ZIF GODE A
Name of Bank, D	epository, etc.		
	Country Club Bank		
Mailing Address	P.O. Box 410889		
	Kansas City	MO	64141
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng rantcipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
TEAM CURTIS JOIN	NT FUNDRAISING COMMITTEE		
Marilia a Addus a	370 EAST SOUTH TEMPLE		
Mailing Address	SUITE 580		
	SALT LAKE CITY	UT	84111
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X	oint Fundraising Represent	ative Leadership PAC Spo
			ative Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
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Designated Agent: Identi	fy by name, address (phone number – optional		Ative Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional		
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Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit	fy by name, address (phone number – optional CITY ▲ Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or many part of the content of the conte	fy by name, address (phone number – optional CITY ▲ Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
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Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or management of Bank, Truist	fy by name, address (phone number – optional CITY Ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE ZIP code ts funds, holds accounts, rents
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the sa	fy by name, address (phone number – optional CITY CITY ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE ZIP code ts funds, holds accounts, rents
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the sa	fy by name, address (phone number – optional CITY CITY ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE ZIP code ts funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:			
1.		FEC ID r	number	C
2.		FEC ID r	number	С
3.		FEC ID r	number	С
4.		FEC ID r	number	С
Name of Any Connected	l Organization, Affiliated Committee, Joint	Fundraising Repre	sentative	, or Leadership PAC Spons
KIM VICTORY FUN) 			
Mailing Address	9460 TEGNER ROAD			
	HILMAR		CA	95324
Relationship:	CITY ▲	5	STATE A	ZIP CODE ▲
	Affiliated Committee Affiliated Committee fy by name, address (phone number – option	X Joint Fundraising F	Representa	tive Leadership PAC Spo
Designated Agent: Identi			Representa	tive Leadership PAC Spo
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Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optic	onal)	Representa	Leadership PAC Spo
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FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
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Name of Any Connecte	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
-	G UNDER THE OAKS		· · · · · · · · · · · · · · · · · · ·
Mailing Address	2870 DOBIE ROAD		
	MASON	MI	48854
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident		int Fundraising Represent	Leadership PAC Spo
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Designated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Spo
Designated Agent: Ident	ify by name, address (phone number – optional)		
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or necessarily and the second sec	ories: List all banks or other depositories in which naintains funds. 9ht Bank 4445 Willard Avenue Suite 100	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which naintains funds. ght Bank 4445 Willard Avenue	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundrais	ing Farticipant.		
1.		FEC ID number	С
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4.		FEC ID number	C
_	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponso
STAUBER VICTOR	Y FUND 		
Mailing Address	332 W. LEE HIGHWAY		
Ü	#303		
	WARRENTON	VA	20186
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Julius Juliu	oint Fundraising Represent	ative Leadership PAC Spo
			ative Leadership PAC Spo
Designated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident	ify by name, address (phone number – optional)		
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FEC Form 1S (Revised 02/2017)

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Name of Amy Commented	Owner in the Affiliated Committee Laint From	ducinium Dominio autotim	and and analysis BAO Consus
MILLER VICTORY F	Organization, Affiliated Committee, Joint Fun UND	draising Representative	e, or Leadership PAC Sponso
	228 S. WASHINGTON STREET		
Mailing Address			
	SUITE 115		
	ALEXANDRIA	L VA	22314
			ZIP CODE ▲
	CITY d Organization Affiliated Committee X Jo y by name, address (phone number – optional)	STATE ▲ int Fundraising Representa	
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FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
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3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	OITV A	STATE ▲	ZIP CODE ▲
Connecte	clTY ▲ d Organization	t Fundraising Representa	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Spo
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Participant:		
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lame of Any Connector	l Organization, Affiliated Committee, Joint Fund	Iraicina Ponrocontativ	or Leadership BAC Spen
_	ICTORY COMMITTEE	Haising Representative	
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sp
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FEC Form 1S (Revised 02/2017)

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-	Connected Or	_	ated Committee, Joint	Fundraising Re	presentativo	e, or Leadership PAC Spons
Mailing Ad	ddress	12176 CHANCER	RY STATION CIR			
	l					
		RESTON			_ VA 	20190
Relationsh	nip:		CITY A		STATE ▲	ZIP CODE ▲
Designated Age	ent: Identify by	y name, address	(phone number – option	nal)		
Full Name		y name, address	(phone number – option	nal)		
		y name, address	(phone number – option	nal)		
Full Name		y name, address	(phone number – option	nal)		
Full Name		y name, address				
Full Name Mailing Addr		y name, address	(phone number – option		STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	С
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Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
GUEST MAJORITY	FUND		
	1 120 N CONGRES ST STE 300		
Mailing Address	120 N CONGRES 31 312 300		
	JACKSON	MS	39201
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Spo
	Affiliated Committee X Joint by by name, address (phone number – optional)	Fundraising Hepresent	Leadership TAO Spo
Designated Agent: Identi		Fundraising Hepresent	Leadership TAC Spc
Designated Agent: Identi		Fundraising Hepresent	Leadership TAC Spc
Designated Agent: Identi		Fundraising Hepresent	Leadership TAC Spc
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
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FEC Form 1S (Revised 02/2017)

	ng Participant:		
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Name of Any Connected	I Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Sponse
Mailing Address	499 SOUTH CAPITOL STREET SW		
	#407		
Relationship:	WASHINGTON CITY A	DC STATE A	20003 ZIP CODE ▲
r totation on p.	0111 2	SIAIL	211 0001
	Affiliated Committee X Joint fy by name, address (phone number – optional)		ative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

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nnected Orga	nization, Affilia	ted Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Spons
ress 9	856 ARCHER LAI	NE			
L	UBLIN			ОН	43017
:		CITY A		STATE ▲	ZIP CODE ▲
t: Identify by r	name, address (phone number – optio	nal)		
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t: Identify by r	name, address (phone number – optio	nal)		
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FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi			
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lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
GONZALEZ VICTOR	RY FUND		
Mailing Address	9856 ARCHER LANE		
	DUBLIN	OH	43017
Relationship:	CITY A	STATE A	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Sp
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Full Name Mailing Address TITLE OR POSITION Lianks or Other Deposite afety deposit boxes or management of Bank, Bryan	city 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 Janks or Other Deposite afety deposit boxes or make the property of the propert	cories: 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 Deposite afety deposit boxes or make the property of the propert	cories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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lame of Any Conne	ected Organization,	Affiliated Committee, Joint	Fundraising Represent	ative, or Leadership PAC	Spons
BUCKEYE VICT	ORY FUND				
Mailing Address	499 SOUTH	CAPITOL STREET SW			<u> </u>
	407				
	WASHINGT	ON	DC	20003	
Relationship:		CITY A	STAT	E ▲ ZIP COI	DE 🛦
	nected Organization	lress (phone number – optior	nal)		
	-	lress (phone number – option	nal)		
esignated Agent: lo	-	Iress (phone number – optior	nal)		
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FEC Form 1S (Revised 02/2017)

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lame of Any Connect	ed Organization, Affiliated Committee, .	Joint Fundraising	Representativ	e, or Leadership PAC Spons
NDSTRONG				
Mailing Address	1515 BURNT BOAT DR NUM 112			
	BISMARCK		ND	58503
Datain 11			STATE ▲	ZIP CODE ▲
	CITY ▲ cted Organization		aising Represent	ative Leadership PAC Sp
Conne	cted Organization Affiliated Committee		aising Represent	ative Leadership PAC Sp
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FEC Form 1S (Revised 02/2017)

	ng Participant:		
1		FEC ID number	С
2		FEC ID number	C
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4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	, or Leadership PAC Spons
JOHN ROSE VICTO	ORY FUND		
Mailing Address	PO BOX 2404		
	COOKEVILLE	TN	38502
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	fy by name, address (phone number – optional)		
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)		
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Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit lafety deposit boxes or many states.	CITY A CITY A pries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	CITY ▲ CITY ▲ Ories: List all banks or other depositories in which raintains funds. ical Bank 333 E. Main Street	the committee deposits	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	CITY CITY Ories: List all banks or other depositories in which naintains funds. ical Bank	elephone Number	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	g Participant:			
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3		FE	C ID number	C
4.		FE	C ID number	C
lame of Any Connected	Organization, Affiliated Committee	, Joint Fundraising	Representativ	e, or Leadership PAC Spons
HRW VICTORY FUN	ID			
Mailing Address	824 S MILLEDGE AVE STE 101			
	ATHENS		GA L	30605
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee		aising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee		aising Represent	ative Leadership PAC Spo
Connecte Pesignated Agent: Identif	d Organization Affiliated Committee		aising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee		aising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee			
Connecte Designated Agent: Identif	d Organization Affiliated Committee		aising Represent	Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee	optional)		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of the control of	Affiliated Committee by by name, address (phone number CITY ries: List all banks or other depositor	- optional) Telephor	STATE A	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the composition of Bank, Depository, etc. First Formula (Connected Agent)	Affiliated Committee by by name, address (phone number CITY CITY ries: List all banks or other deposited aintains funds.	- optional) Telephor	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundrais	ing rantopanti		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connecte	d Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
TEAM TIMMONS			
Mailing Address	228 S. WASHINGTON ST.		1 1 1 1 1 1 1 1 1
	STE. 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Joint Joi	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		int Fundraising Represent	ative Leadership PAC Sp
Connect		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)	sint Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional)		
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 anintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident 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 aintains funds. Bank	STATE Telephone Number ch the committee deposit	ZIP CODE ZIP CODE s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected , WESTERMAN VICT	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 21097		
			<u> </u>
	HOT SPRINGS	AR	71903
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
		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		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	Leadership PAC Sp
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 CITY pries: List all banks or other depositories in which anintains funds.	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 pries: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

GA 30605 STATE A ZIP CODE Committee X Joint Fundraising Representative Leadership PA number – optional) Y A STATE A ZIP CODE A	h). Joint Fundraisi	ig Farticipant.		
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Dommittee, Joint Fundraising Representative, or Leadership PAC STATE A ZIP CODE A STATE A ZIP CODE A Telephone Number	3.		FEC ID number	С
GA 30605 STATE A ZIP CODE Committee X Joint Fundraising Representative Leadership PA number – optional) Y A STATE A ZIP CODE A Telephone Number – — — —	4.		FEC ID number	C
GA 30605 STATE A ZIP CODE Committee X Joint Fundraising Representative Leadership PA number – optional) Y A STATE A ZIP CODE A Telephone Number – — — —	ame of Any Connected	Organization Affiliated Committee Joint Fun	draising Representativ	e or Leadershin PAC Snors
GA 30605 CITY A STATE A ZIP CODE number – optional) STATE A ZIP CODE Telephone Number — ZIP CODE	TEAM HUDSON			
GA 30605 CITY A STATE A ZIP CODE number – optional) STATE A ZIP CODE Telephone Number — ZIP CODE				
STATE A ZIP CODE Committee X Joint Fundraising Representative Leadership PA number – optional) Ty A STATE A ZIP CODE A Telephone Number	Mailing Address	824 S MILLEDGE AVE, STE 101		
STATE A ZIP CODE Committee X Joint Fundraising Representative Leadership PA number – optional) Ty A STATE A ZIP CODE A Telephone Number				
Number – optional) Telephone Number Leadership PA Leadership PA Leadership PA ZIP CODE A		ATHENS	GA	30605
number – optional) Y A STATE A ZIP CODE A Telephone Number	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Telephone Number	Connecte		nt Fundraising Represent	ative Leadership PAC Sp
Telephone Number	Connecte	ed Organization Affiliated Committee X Joint Joi	nt Fundraising Represent	ative Leadership PAC Sp
Telephone Number	Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Joint Joi	nt Fundraising Represent	ative Leadership PAC Sp
Telephone Number	esignated Agent: Identi	ed Organization Affiliated Committee X Joint Joi	nt Fundraising Represent	ative Leadership PAC Sp
	esignated Agent: Identi	ed Organization Affiliated Committee X Joint Joi	nt Fundraising Represent	ative Leadership PAC Sp
depositories in which the committee deposits funds, holds accounts,	esignated Agent: Identi	Affiliated Committee X Joint J		Leadership PAC Sp
	esignated Agent: Identi	ed Organization Affiliated Committee		
	Connected nt: Identification of the connected nt: Identification o	Affiliated Committee	STATE A Telephone Number	ZIP CODE A
FL 32405	esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE ZIP CODE s funds, holds accounts, rent

FEC Form 1S (Revised 02/2017)

MEUSER VICT	1 499 SOLITH CAPITOL STREET SW	
3. 4. Name of Any Content MEUSER VICTORY Mailing Addre Relationship: Co Co Designated Agent: Full Name	FEC ID number C FEC ID number C C C C C C C C C C C C C	
A. MEUSER VICT Mailing Addre Relationship: Co Co Designated Agent:	FEC ID number C Sected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC DRY FUND 499 SOUTH CAPITOL STREET SW #405 WASHINGTON CITY A STATE A ZIP COE Innected Organization Affiliated Committee X Joint Fundraising Representative Leadership	
Name of Any Conda MEUSER VICTOR Mailing Address Mailing Address Conda Co	ected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PACORY FUND 499 SOUTH CAPITOL STREET SW #405 WASHINGTON CITY A STATE A ZIP COE	
MEUSER VICT	Affiliated Committee Affiliated Committee	
Mailing Addre Relationship: Co Co Designated Agent: Full Name	#405 WASHINGTON CITY A STATE A ZIP COE snected Organization Affiliated Committee X Joint Fundraising Representative Leadership	
Relationship: Co Co Designated Agent: Full Name	#405 WASHINGTON CITY ▲ STATE ▲ ZIP COE Innected Organization Affiliated Committee X Joint Fundraising Representative Leadership	
Relationship: Co Co Designated Agent: Full Name	#405 WASHINGTON CITY ▲ STATE ▲ ZIP COE Innected Organization Affiliated Committee X Joint Fundraising Representative Leadership	
Relationship: Co Co Designated Agent: Full Name	#405 WASHINGTON CITY ▲ STATE ▲ ZIP COE Innected Organization Affiliated Committee X Joint Fundraising Representative Leadership	
Designated Agent:	CITY ▲ STATE ▲ ZIP COE Innected Organization Affiliated Committee X Joint Fundraising Representative Leadership	
Designated Agent:	nected Organization Affiliated Committee X Joint Fundraising Representative Leadership	
Designated Agent: Full Name		PAC Spo
Mailing Address		
TITLE OR PO	TION ▼ CITY ▲ STATE ▲ ZIP CODE	Ε ▲
	Telephone Number	

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
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4		FEC ID number	С
Name of Any Connecte	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
VAN TAYLOR VICT	ORY FUND		
Mailing Address	1900 PRESTON ROAD		
	#267 - PMB 229		
Relationship:	PLANO	TX TX	75093
neialionship.	CITY ▲	STATE ▲	ZIP CODE ▲
Connect Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident Full Name Mailing Address	CITY	STATE A	ZIP CODE A
Designated Agent: Ident	CITY A	STATE A	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposites Safety deposit boxes or necessity.	CITY ▲ CITY ▲ Telepories: List all banks or other depositories in which	elephone Number	
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or not safety deposit boxes or not safety deposit boxes. Name of Bank, Depository, etc.	CITY ▲ CITY ▲ Ories: List all banks or other depositories in which naintains funds. Gulf Bank 900 Town & Country Lane	elephone Number	

FEC Form 1S (Revised 02/2017)

r(h). Joint Fundrais	ing Participant:			
1.		FE(C ID number	С
2		FE(C ID number	С
3.		FEC	C ID number	С
4		FEG	C ID number	С
_	d Organization, Affiliated Committee	, Joint Fundraising	Representativ	e, or Leadership PAC Sponso
Mailing Address	10809 GRASSY CREEK PL			
	RALEIGH		NC	27614
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	ted Organization Affiliated Committee tify by name, address (phone number	_	ising Represent	ative Leadership PAC Spo
			ising Represent	ative Leadership PAC Spo
Designated Agent: Iden			ising Represent	ative Leadership PAC Spo
Designated Agent: Iden			ising Represent	Leadership PAC Spo
Designated Agent: Iden				Leadership PAC Spo
Designated Agent: Iden	tify by name, address (phone number		STATE A	Leadership PAC Spo
Designated Agent: Iden Full Name Mailing Address	tify by name, address (phone number	optional)		
Designated Agent: Iden Full Name Mailing Address TITLE OR POSITIO	tify by name, address (phone number of the content	- optional) Telephon	STATE A	ZIP CODE A
Pesignated Agent: Iden Full Name Mailing Address TITLE OR POSITION Banks or Other Depositions of Bank, Depository, etc.	tify by name, address (phone number of the control	- optional) Telephon	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1.							
				FEC	ID number	C	
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4				FEC	ID number	C	
	ny Connected	Organization, Af	filiated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC S	Spons
Mailing	g Address	PO BOX 2485					
		SPRINGFIELD) 		_ ∨A 	22152	
						ZIP CODE	
Designated	Agent: Identify	Organization by name, address	CITY A Affiliated Committee	Soint Fundraisi	STATE Ang Represent		
Designated Full Nan	Agent: Identify		Affiliated Committee				
Designated	Agent: Identify		Affiliated Committee				
Designated Full Nan	Agent: Identify		Affiliated Committee				
Designated Full Nan Mailing	Agent: Identify me	by name, addres	Affiliated Committee		ng Represent	ative Leadership PA	AC Spo
Designated Full Nan Mailing	Agent: Identify	by name, addres	Affiliated Committee		ng Representa		AC Spo

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ig ranticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	С
4.		FEC ID number	C
Iame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
Relationship:	BETHESDA	MD OTATE A	20824
ricialionship.	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	d Organization Affiliated Committee X J	loint Fundraising Represent	
			ative Leadership PAC Spo
Pesignated Agent: Identi			
Pesignated Agent: Identi			
Pesignated Agent: Identi	y by name, address (phone number – optional		ZIP CODE A
Pesignated Agent: Identi			
nated Agent: Identi I Name Liling Address TLE OR POSITION or Other Deposited deposit boxes or management of the control of	y by name, address (phone number – optional CITY A CITY A pries: List all banks or other depositories in whaintains funds.	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.	y by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or management.	y by name, address (phone number – optional CITY A CITY A pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Ganks or Other Deposite afety deposit boxes or make the proposition of Bank, depository, etc.	y by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number ich the committee deposi	ZIP CODE ZIP code st funds, holds accounts, rents
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional CITY CITY CITY Ories: List all banks or other depositories in whaintains funds. est Bank 663 W. Nees Avenue	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

I			
1.		FEC ID number	С
2.		FEC ID number	С
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7.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representativ	re, or Leadership PAC Spons
MILLER-MEEKS VIC	CTORY FUND		
Mailing Address	PO BOX 183		
	HUDSON	ı ı Wi ı	54016
		STATE A	ZIP CODE ▲
Relationshin:	CITY A		ZIF GODL A
	CITY ▲ d Organization	nt Fundraising Represent	tative Leadership PAC Spo
Connecte	d Organization Affiliated Committee X Join		tative Leadership PAC Spo
Connecte Connecte Connecte Connecte	d Organization Affiliated Committee X Join		tative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Join		tative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Join		tative Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee X Join y by name, address (phone number – optional)		Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Join y by name, address (phone number – optional) CITY	nt Fundraising Represent	

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	C
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Name of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	, or Leadership PAC Sponse
Mailing Address	3030 HARTLEY RD		
	STE 120		
	JACKSONVILLE		32257
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Ident	fy by name, address (phone number - optional)		
Designated Agent: Ident	ify by name, address (phone number – optional)		
	ify by name, address (phone number – optional)		
Full Name	ify by name, address (phone number – optional)		
Full Name	ify by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or n	CITY ▲ ories: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be boxed by the boxes or not be boxed by the boxed by the boxes or not be boxed by the boxes or not be boxed by the	CITY ▲ CITY ▲ ories: List all banks or other depositories in which naintains funds. of North Georgia	elephone Number	

FEC Form 1S (Revised 02/2017)

	ng Participant:			
1.			FEC ID number	C
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Name of Any Connected	Organization, Affiliated	Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponso
FEENSTRA VICTOR	_			
Mailing Address	PO BOX 183			
	HUDSON		ı ı Wi ı	, 54016
-				
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
Full Name				
Mailing Address				
	1			
	I		1 1 1	1 1 1
		ITY A	STATE A	ZIP CODE A
TITLE OR POSITION	▼ C	ITY 🛦	STATE A	ZIP CODE A

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1.			
1.		FEC ID number	С
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3.		FEC ID number	C
4.		FEC ID number	C
4.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
CALVERT VICTORY	FUND		
Mailing Address	PO BOX 30844		
	1		
	BETHESDA	, , , MD ,	20824
		STATE A	ZIP CODE ▲
Relationship:	CITY A		
Connected		Fundraising Represent	ative Leadership PAC Spo
Connected	Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connected Connected Connected Connected Connected	Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
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Connected Connected Connected Connected Connected Connected	Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee X Joint by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
Connected Connected Connected Connected Connected Connected	Organization Affiliated Committee X Joint by name, address (phone number – optional) CITY		

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	ng Participant:		
1.		FEC ID number	C
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Name of Any Connected	Organization, Affiliated Committee, Joint Funds	aising Representative	e, or Leadership PAC Spons
RETIRE OR LOSE			,
Mailing Address	320 1ST ST SE		
Relationship:	WASHINGTON CITY	DC STATE A	20003 ZIP CODE ▲
		Fundraising Representa	
Full Name			
Full Name			
	CITY A	STATE A	ZIP CODE A
Mailing Address		STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or many the second	Te	elephone Number	
Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety	pries: List all banks or other depositories in which aintains funds. al City Bank	elephone Number	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
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lame of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
LAWLER VICTORY	FUND		
Mailing Address	PO BOX 87		
	SOUTH SALEM	NY NY	10590
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joi	nt Fundraising Representa	Leadership PAC Spo
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Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint J	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint J		
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or management of the period of	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Period of Banks or Other Deposite afety deposit boxes or make the period of Bank, Depository, etc.	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	ng Participant:				
1.			FEC	ID number	С
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·					
Name of Any Connected	l Organization, Affi	liated Committee, Joint	Fundraising Re	presentative	e, or Leadership PAC Sponso
WAGNER FOR MIS	SOURI				
Mailing Address	PO BOX 183				
	HUDSON		1	WI	54016
Relationship:		CITY A		STATE A	ZIP CODE ▲
	ed Organization		✓ Joint Fundraisir ✓ Joint		
Full Name					
Mailing Address					
TITLE OR POSITION	1 V	CITY A		STATE A	ZIP CODE A
TITLE OR POSITION	1 🛧	CITY A	Telephone		ZIP CODE A

FEC Form 1S (Revised 02/2017)

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1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spons
ALFORD VICTORY	COMMITTEE		
Mailing Address	555 METRO PLACE NORTH		
	525		
	DUBLIN	ı ı OH ı	43017
		STATE A	ZIP CODE ▲
Relationship:	CITY A	01/11 =	ZII CODE Z
	CITY ▲ ed Organization	Fundraising Represent	Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Represent	Leadership PAC Spo
Connecte Connecte Connecte Connecte	ed Organization Affiliated Committee X Joint	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint for by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint fly by name, address (phone number – optional) CITY		

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisin	g 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	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 4157		
Relationship:	CHEYENNE CITY	WY WY STATE ▲	82003
Connected	I Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Spo
Designated Agent: Identify	by name, address (phone number - optional)		
Full Name			
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	V	STATE elephone Number	ZIP CODE ▲
Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which	elephone Number	
Banks or Other Depositor cafety deposit boxes or many same of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds. apital Bank of Texas 310 West Wall Street	elephone Number	

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	C
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lame of Any Connected	I Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
KEAN VICTORY FU			· · · · · · · · · · · · · · · · · · ·
Mailing Address	PO BOX 999		
	EDISON	NJ NJ	08818
		STATE ▲	ZIP CODE ▲
	CITY ▲ ed Organization	nt Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	Affiliated Committee X Join fy by name, address (phone number – optional)		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional) CITY	nt Fundraising Representa	
Connecte resignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which paintains funds.	STATE Stephone Number	ZIP CODE A
Connected Resignated Agent: Identification of Position Identification Ident	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY CITY Bank Bank	STATE Stephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundrais	sing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
-	ed Organization, Affiliated Committee, Joint Fur	ndraising Representativ	re, or Leadership PAC Sponso
Mailing Address	POST OFFICE BOX 905		
	TUPELO	MS	38802
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connec		oint Fundraising Represen	tative Leadership PAC Spo
Connec	eted Organization Affiliated Committee X Jo		tative Leadership PAC Spo
Connect Connec	eted Organization Affiliated Committee X Jo		tative Leadership PAC Spo
Connect Con	eted Organization		tative Leadership PAC Spo
Connect Con	eted Organization Affiliated Committee X Journal Journal Affiliated Committee X Journal Journa		
Connect Con	atted Organization Affiliated Committee X Journal String by name, address (phone number – optional)		Leadership PAC Spo
Connect Con	atted Organization Affiliated Committee X Journal String by name, address (phone number – optional)		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Depose safety deposit boxes or	atted Organization	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Iden Full Name Mailing Address TITLE OR POSITION Banks or Other Depose Safety deposit boxes or Name of Bank, Depository, etc.	Affiliated Committee X Journal of tify by name, address (phone number – optional) CITY CITY itories: List all banks or other depositories in white maintains funds.	STATE A Telephone Number	ZIP CODE A

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
7.			
lame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
JOHNSON LEADER	SHIP FUND		
Mailing Address	2900 CLEARVIEW PKWY		
	SUITE 206		
	METAIRIE	LA L	70006
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ed Organization Affiliated Committee X Joint	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name		Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi		Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name		Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name			Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Connecte Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or management of the control o	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which raintains funds.	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or management of the control o	fy by name, address (phone number – optional) CITY CITY Te	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 period of Bank, Depository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which raintains funds.	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or make the same of Bank, River	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which paintains funds. Valley Bank	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 period of Bank, Depository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which paintains funds. Valley 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	C
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
Mailing Address	1818 MILTON AVE		
maining / Mariood	#1448		
Relationship:	JANESVILLE CITY A	WI STATE ▲	53545 ZIP CODE ▲
Connecte		Fundraising Represent	ative Leadership PAC Spo
Connected Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connected Connected Pesignated Agent: Identification	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connected Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	Leadership PAC Spo
Connected Agent: Identi	Affiliated Committee X Joint by by name, address (phone number – optional)		
Connected Agent: Identi	Affiliated Committee X Joint by pame, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connected Agent: Identification of the Agent Age	Affiliated Committee X Joint by by name, address (phone number – optional) CITY		
Connected Resignated Agent: Identification of the Position of	Affiliated Committee X Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected Pesignated Agent: Identification of Bank, Pepository, etc.	Affiliated Committee X Joint fy 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)

(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
-	l Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
TAKE BACK THE H	OUSE 2022		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824-0844
Deletienskin	CITY A	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Represente	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee × Join for by name, address (phone number – optional)		
Connecte Designated Agent: Identi Full Name	Affiliated Committee × Join for by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee × Join for by name, address (phone number – optional)		
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Join for by by name, address (phone number – optional) CITY CITY Ories: 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 safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee X Join for by by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds.	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	C
3.		FEC ID number	С
4.		FEC ID number	С
lome of Any Connector	A Overenization Affiliated Committee Laint Fund	reising Depresentative	a ay Laadayahin DAC Saana
_	I Organization, Affiliated Committee, Joint Fund GRESS VICTORY FUND	raising Representative	e, or Leadership FAC Spons
Mailing Address	10 N. CADDO ST.		
	PMB #174		
	CLEBURNE	, , , , , , , , , , , , , , , , , , ,	76031
Deletionship	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC Spo
Connecto	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Spo
Connecte Pesignated Agent: Identi	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Spo
Connected Agent: Identification of the Connected Agent: I	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Spo
Connected Agent: Identification of the Connected Agent: I	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Spo
Connected Agent: Identification of the Connected Agent: I	Affiliated Committee X Join fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spo
Connected Agent: Identification of the Identification of the Identification of the Identification of th	Affiliated Committee X Join fy by name, address (phone number – optional) CITY		
Connected Pesignated Agent: Identification of the Position of	Affiliated Committee	STATE A	ZIP CODE A
Connected Resignated Agent: Identification of Position Address TITLE OR POSITION Control of Position	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

ion, Affiliated Committee, Joint Funda BOULEVARD CITY A CITY A A A A A CITY A Joint	FL STATE A	C C C c, or Leadership PAC Spons 33606 ZIP CODE
BOULEVARD A CITY	FEC ID number FEC ID number raising Representative	c, or Leadership PAC Spons
BOULEVARD A CITY	FEC ID number	o, or Leadership PAC Spons
BOULEVARD A CITY	raising Representative	a, or Leadership PAC Spons
BOULEVARD A CITY	FL STATE A	33606
CITY A	STATE ▲	
CITY A	STATE ▲	
CITY A	STATE ▲	
CITY A	STATE ▲	
		ZIP CODE A
on Affiliated Committee X Joint		
CITY A	STATE ▲	ZIP CODE ▲
	elephone Number	
all banks or other depositories in which ds.	the committee deposits	s funds, holds accounts, re
Salle Street		
Salle Street		61350
	nk 	nk

FEC Form 1S (Revised 02/2017)

r(h). Joint Fundrais i	ing 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	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
Relationship:	ALEXANDRIA CITY	VA VA STATE ▲	22314 ZIP CODE ▲
Connect	ed Organization	t Fundraising Representa	ative Leadership PAC Spo
Full Name	<u> </u>		
Mailing Address			
ivialiling Address			
ivialiling Address			
	CITY A	STATE ▲	ZIP CODE A
TITLE OR POSITIO	N ▼	STATE ▲	ZIP CODE A
TITLE OR POSITION Banks or Other Deposit safety deposit boxes or n	n V	elephone Number	
TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be boxed	cories: List all banks or other depositories in which naintains funds.	elephone Number	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundrais	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	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
TEAM MCCAUL TE	XAS VICTORY		
Mailing Address	1005 CONGRESS AVE STE 400		
Mailing Address			
	AUGTIN		70704
	AUSTIN		78701
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X	oint Fundraising Represent	ative Leadership PAC Spo
			ative Leadership PAC Spo
Designated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident	ify by name, address (phone number – optional		Leadership PAC Spo
Designated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional		
Pesignated Agent: Ident Full Name	ify by name, address (phone number – optional	STATE A	
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION LITTLE OR POSITION Banks or Other Deposit	ify by name, address (phone number – optional CITY ▲ Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name	ify by name, address (phone number – optional CITY ▲ Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or necessarily and the second sec	ify by name, address (phone number – optional CITY ▲ Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or not be safety deposited. Name of Bank, Empir	ories: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name	ories: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name	ories: List all banks or other depositories in whaintains funds.	STATE A Telephone 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
-	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	824 S. MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	t Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Join	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Join	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Join fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or markets.	Affiliated Committee	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.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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				number	С
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			FEC II) number	С
y Connected C)rganization, Afl	iliated Committee, Join	Fundraising Rep	resentative	e, or Leadership PAC Spons
SMITH VICTO	ORY FUND				
Address	228 S. WASHIN	NGTON STREET			
	SUITE 115				
	ALEXANDRIA			_ VA	22314
nship:		CITY ▲		STATE A	ZIP CODE ▲
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ddraee					
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add 655					
address.					
DR POSITION		CITY A		STATE A	ZIP CODE A
	Address Connected Agent: Identify	Address 228 S. WASHIN SUITE 115 ALEXANDRIA Inship: Connected Organization Agent: Identify by name, address e	Address 228 S. WASHINGTON STREET SUITE 115 ALEXANDRIA Connected Organization Affiliated Committee Agent: Identify by name, address (phone number – options)	Address 228 S. WASHINGTON STREET SUITE 115 ALEXANDRIA Connected Organization Affiliated Committee Agent: Identify by name, address (phone number – optional)	Address 228 S. WASHINGTON STREET ALEXANDRIA ALEXANDRIA Connected Organization Affiliated Committee Agent: Identify by name, address (phone number – optional) e

FEC Form 1S (Revised 02/2017)

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3.			FEC ID nu	mber	C
4.			FEC ID nu	mber	C
Name of Any Conne	ected Organization	n, Affiliated Committee, Joint	Fundraising Repres	entative,	or Leadership PAC Spons
WITTMAN VICT	ORY COMMITTI	E E 			
Mailing Address	P.O. BOX	26141			
	ALEXAND	DRIA		VA	22313
Relationship:		CITY A	Sī	ATE 🛦	ZIP CODE ▲
esignated Agent: le	dentify by name, a	ddress (phone number – optior	nal)		
	dentify by name, a	ddress (phone number – optior	nal)		
Designated Agent: I	dentify by name, a	ddress (phone number – optior	nal)		
Pesignated Agent: Id	dentify by name, a	ddress (phone number – option	nal)		
Pesignated Agent: Id	dentify by name, a				
Pesignated Agent: Id		ddress (phone number – option		TE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Organization, Affilia DRY COMMITTEE	ated Committee, Join	FEC FEC	ID number ID number ID number ID number Epresentativ	C C C re, or Leadership PAC	Sponso
DRY COMMITTEE	ated Committee, Join	FEC FEC	ID number	C	Spons
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DRY COMMITTEE	ated Committee, Joir	nt Fundraising R	epresentativ	e, or Leadership PAC	Sponse
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					·
P.O. BOX 26141					
P.O. BOX 26141					
P.O. BOX 26141					
1					
ALEXANDRIA			VA	22313	
	CITY A		STATE ▲	ZIP CODI	E 🛦
y sy hame, address	t i i i i i i i i i				
	CITY A		STATE A	ZIP CODE	
▼	0111 2			211 0002	_
		Telephone	Number		
f	fy by name, address	Affiliated Committee fy by name, address (phone number – option of the committee) CITY Ories: List all banks or other depositories in	Affiliated Committee X Joint Fundraising for by name, address (phone number – optional) CITY Telephone Telephone	Affiliated Committee	Affiliated Committee

FEC Form 1S (Revised 02/2017)

	ng 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	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Sponso
Mailing Address	228 S. WASHINGTON STREET		1 1 1 1 1 1 1 1 1 1
	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	fy by name, address (phone number – optional)		
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identi			
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank, Flushi	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	Telephone Number	
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or management of Bank, Depository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	Telephone Number	
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or many part of Bank, Flushi	cories: List all banks or other depositories in whice aintains funds.	Telephone Number	
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or management of Bank, Depository, etc.	cories: List all banks or other depositories in whice aintains funds.	Telephone Number	

FEC Form 1S (Revised 02/2017)

	g Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
4.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
GREG PENCE VICT	ORY		
Mailing Address	P.O. BOX 275		
	TAYLORSVILLE	ı ı IN ı	47280
		STATE A	ZIP CODE ▲
Relationshin:	CITY		ZIF CODE A
	CITY ▲ d Organization	Fundraising Represent	ative Leadership PAC Spo
Connected	d Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecter Designated Agent: Identify	d Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	d Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	d Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name Mailing Address	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Representation	
Connected Designated Agent: Identify Full Name	d Organization Affiliated Committee X Joint by by name, address (phone number – optional) CITY		Leadership PAC Spo

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
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponse
Mailing Address	9070 IRVINE CENTER DRIVE		
	SUITE 150		
Relationship:	IRVINE CITY A	CA STATE ▲	92618 ZIP CODE ▲
	d Organization	nt Fundraising Representa	ative Leadership PAC Spo
Full Name			
Mailing Address			
g			
g			
TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
-	•	STATE ▲ Telephone Number	ZIP CODE A
TITLE OR POSITION	pries: List all banks or other depositories in which	Telephone Number	
TITLE OR POSITION Banks or Other Depositorsafety deposit boxes or many	pries: List all banks or other depositories in which	Telephone Number	
TITLE OR POSITION Banks or Other Depositors of Banks, Comm	pries: List all banks or other depositories in which aintains funds.	Telephone Number	
TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or management of Bank, Common Depository, etc.	pries: List all banks or other depositories in which aintains funds.	Telephone Number	
TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or management of Bank, Common Depository, etc.	pries: List all banks or other depositories in which aintains funds.	Telephone Number	

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
GIMENEZ VICTORY	COMMITTEE		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	ı ı GA ı	30605
		STATE A	ZIP CODE ▲
Relationshin:	CITY A	SIAIL	ZIF CODE A
	CITY ▲ d Organization Affiliated Committee ✓ Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee X Joint by by name, address (phone number – optional)		Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint by by name, address (phone number – optional) CITY	Fundraising Representation	

FEC Form 1S (Revised 02/2017)

1.			
		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
4.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
BURGESS VICTORY	FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	ı MD ı	20824
Relationship:	CITY A	STATE A	ZIP CODE ▲
neialionsilio.		0	
Connected	d Organization Affiliated Committee X Joint by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connected		Fundraising Represent	Leadership PAC Spo
Connected Connected Designated Agent: Identify		Fundraising Represent	Leadership PAC Spo
Connected Designated Agent: Identify Full Name		Fundraising Represent	Leadership PAC Spo
Connected Designated Agent: Identify Full Name		Fundraising Represent	Leadership PAC Spo
Connected Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connected Designated Agent: Identify Full Name	by name, address (phone number – optional) CITY		

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Depository, etc. Address 2 North 2nd Street	(h). Joint Fundraisir	g Participant:		
3.	1.		FEC ID number	C
4. STATE A ZIP CODE A Title OR POSITION ▼ CITY A STATE A ZIP CODE A T	2.		FEC ID number	C
As are of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spon RESCHENTHALER VICTORY FUND Mailing Address SUITE 101			FEC ID number	C
Mailing Address Sulf			FEC ID number	С
Mailing Address SUITE 101 ATHENS GA 30605 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC State A ZIP CODE A Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY A STATE A ZIP CODE A Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number Telephone Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rentatety deposit boxes or maintains funds. Idame of Bank, PNC Bank PNC Bank Identify Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rentatety deposit boxes or maintains funds. Idame of Bank, PNC Bank Identify Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rentatety deposit boxes or maintains funds. Identify Depository, etc.	-		aising Representative	e, or Leadership PAC Spons
Mailing Address SUITE 101 ATHENS GA 30605 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC State A ZIP CODE A Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY A STATE A ZIP CODE A Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number Telephone Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rentatety deposit boxes or maintains funds. Idame of Bank, PNC Bank PNC Bank Identify Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rentatety deposit boxes or maintains funds. Idame of Bank, PNC Bank Identify Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rentatety deposit boxes or maintains funds. Identify Depository, etc.				
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee	Mailing Address	824 S MILLEDGE AVE		
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization		SUITE 101	<u> </u>	<u> </u>
Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spansarian Leadership PAC Spansarian Affiliated Agent: Identify by name, address (phone number – optional) Full Name	Relationshin:			
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number PNC Bank Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rentafety deposit boxes or maintains funds. Identify the pository, etc. Mailing Address PNC Bank PNC Bank PNC Bank PNC Bank Harrisburg PA 17101	neiationship.	CITY	SIAIE	ZIP CODE A
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number - - Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rent afety deposit boxes or maintains funds. Idame of Bank, Depository, etc. Mailing Address 2 North 2nd Street Harrisburg PA 17101 -	Designated Agent: Identif	y by name, address (phone number – optional)		
Title OR POSITION Telephone Number Telephone		y by name, address (phone number – optional)		
Title OR POSITION Telephone Number Telephone	Full Name	y by name, address (phone number – optional)		
Title OR POSITION Telephone Number Telephone	Full Name	y by name, address (phone number – optional)		
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rent afety deposit boxes or maintains funds. Jame of Bank, Depository, etc. Mailing Address 2 North 2nd Street Harrisburg PA 17101	Full Name	y by name, address (phone number – optional)		
afety deposit boxes or maintains funds. Jame of Bank, PNC Bank Depository, etc. Mailing Address 2 North 2nd Street Harrisburg PA 17101	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name	CITY A	ı	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or main afety deposit boxes or main afety depository, etc.	CITY CITY Te ries: List all banks or other depositories in which aintains funds. ank	lephone Number	
CITY ▲ STATE ▲ ZIP CODE ▲	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or main afety deposit boxes or main afety depository, etc.	CITY CITY Te ries: List all banks or other depositories in which aintains funds. 2 North 2nd Street	the committee deposit	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

	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	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
Mailing Address	2430 VANDERBILT BEACH ROAD		
	STE 108 PMB 260		
Relationship:	NAPLES CITY	FL STATE ▲	34108 ZIP CODE ▲
		Fundraising Representa	
Designated Agent: Identi	fy by name, address (phone number – optional)		
Designated Agent: Identi	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	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposition afety deposit boxes or many states.	CITY ▲ CITY ▲ Te pries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the property of the position of Bank, Depository, etc.	CITY CITY Te pries: List all banks or other depositories in which aintains funds. Bank & Trust	elephone Number	

FEC Form 1S (Revised 02/2017)

h). Joint Fundrais i			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected, GREEN VICTORY F	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
GREEN VICTORT			
Mailing Address	PO BOX 2706		
	BRENTWOOD	TN	37024
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or n	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: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds. On Bank	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundrais	ng 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	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
Relationship:	ALEXANDRIA CITY	VA VA STATE ▲	22314 ZIP CODE ▲
Connect	ed Organization	t Fundraising Representa	tive Leadership PAC Spo
Full Name			
Mailing Address			
Mailing Address			
Mailing Address		1 1 . 1	
	CITY A	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITIO	▼	STATE A	ZIP CODE A
TITLE OR POSITION Banks or Other Depositions of the position	ories: List all banks or other depositories in which	elephone Number	
TITLE OR POSITION Banks or Other Depositions boxes or not boxes or not boxes or not boxes or not boxes. Plains Depository, etc.	ories: List all banks or other depositories in which naintains funds. Capital Bank 201 W. 5th Street	elephone Number	

FEC Form 1S (Revised 02/2017)

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	C
_	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
TIFFANY VICTORY	FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	, , MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Join fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
Designated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
Pesignated Agent: Identi		t Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identi		t Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Spr
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which raintains funds.	STATE A	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the property of the prope	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e or Leadershin PAC Snon
HERN VICTORY FU			
Mailing Address	8630 S PEORIA AVE		
	TULSA	OK	74132
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee X J		ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X J		ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X J		ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X J		ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X J		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X J		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management.	Affiliated Committee X Jories: List all banks or other depositories in whether the design of the committee X Jories and Committee X Jorie	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Joyname, address (phone number – optional CITY CITY CITY Cries: List all banks or other depositories in whaintains funds. Rim Bank	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundrais	ing 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 Fu	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 2485		
	SPRINGFIELD	VA VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	<u> </u>		
Full Name			
Mailing Address	CITY A	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITIO Banks or Other Depositatety deposit boxes or respectively.	tories: List all banks or other depositories in whi	Telephone Number	
Mailing Address TITLE OR POSITIO Banks or Other Deposite Safety deposit boxes or response to the position of Bank, Peop	tories: List all banks or other depositories in whinaintains funds.	Telephone Number	
Mailing Address TITLE OR POSITIO Banks or Other Depositions afety deposit boxes or responsible to the position of Bank, Depository, etc.	tories: List all banks or other depositories in whinaintains funds. le's United Bank 14 S. Moger Avenue	Telephone Number	s funds, holds accounts, rents
Mailing Address TITLE OR POSITIO Banks or Other Depositions afety deposit boxes or responsible to the position of Bank, Depository, etc.	tories: List all banks or other depositories in whinaintains funds.	Telephone Number	

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
Relationship:	BETHESDA CITY A	MD STATE ▲	20824 ZIP CODE ▲
		Fundraising Representa	
Designated Agent: Identif	y by name, address (phone number - optional)		
Full Name	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	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or maintenance.	CITY Te	lephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor bases or mail bank, Depository, etc.	CITY CITY Te ries: List all banks or other depositories in which aintains funds.	lephone Number	

FEC Form 1S (Revised 02/2017)

1						
				FEC II	0 number	С
2				FEC II	0 number	С
3				FEC II	0 number	С
4.				FEC II	0 number	С
	-	Organization, A		Fundraising Rep	oresentativ	e, or Leadership PAC Spons
OBLIVI	VEIS VICTOR	- CONNINTTE				
Mailin	g Address	PO BOX 3084	44			
		BETHESDA		, , , , , ,	MD	20824
						ZIP CODE ▲
		d Organization / by name, addre	CITY Affiliated Committee ess (phone number – option	Joint Fundraising	STATE ▲ g Representa	
Designated Full Nar	Connected Agent: Identify me		Affiliated Committee			
Designated Full Nar	Connected Agent: Identify		Affiliated Committee			
Designated Full Nar	Connected Agent: Identify me		Affiliated Committee			
Designated Full Nar Mailing	Agent: IdentifymeAddress	by name, address	Affiliated Committee	nal)	g Representa	Leadership PAC Spo
Designated Full Nar Mailing	Connected Agent: Identify me	by name, address	Affiliated Committee	nal)	g Representa	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundrais			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connecte	d Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spons
COLLINS FOR TEX	AS VICTORY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident	Affiliated Committee X Joint ify by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Ident		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Ident		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Ident	ify by name, address (phone number – optional)		
Pesignated Agent: Ident	ify by name, address (phone number – optional)	t Fundraising Represent	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional) CITY		
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or name of the control of th	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or name of the control of th	ify by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or name of Bank, Huntin	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposition afety deposit boxes or not be a position of Bank, Bepository, etc.	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposition afety deposit boxes or not be a single pository, etc.	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fu	ındraising Representative	e, or Leadership PAC Spons
TEAM FITZ			
			_
Mailing Address	PO BOX 30844		
Maining / No. 222			
	BETHESDA	ı ı MD ı	20824
Polationshin:	OITV A	CTATE ▲	ZID CODE A
esignated Agent: Identify	CITY ▲ d Organization	STATE ▲ Joint Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Sp
Connected	d Organization Affiliated Committee X	Joint Fundraising Representa	
Connected Pesignated Agent: Identify	d Organization Affiliated Committee X	Joint Fundraising Representa	
Connected Pesignated Agent: Identify	d Organization Affiliated Committee X	Joint Fundraising Representa	
Pesignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optiona	Joint Fundraising Representa	
Connected Pesignated Agent: Identify	y by name, address (phone number – optiona	Joint Fundraising Representa	ative Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

	g Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Sponso
Mailing Address	9070 IRVINE CENTER DRIVE #150		
Relationship:	IRVINE CITY A	CA STATE A	92618 ZIP CODE ▲
		t Fundraising Representa	
Designated Agent: Identify	by name, address (phone number - optional)		
Designated 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	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or main	CITY A Cies: 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 mail Name of Bank, Depository, etc.	CITY CITY Te ries: List all banks or other depositories in which intains funds. D National Bank	elephone Number	

FEC Form 1S (Revised 02/2017)

r(h). Joint Fundrais	sing Participant:		
1.		FEC ID number	C
2		FEC ID number	C
3		FEC ID number	C
4.		FEC ID number	C
Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fun	draising Representative	, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE STE 101	1 1 1 1 1 1 1 1	
. 3			
5	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	<u></u>		
Ü			
			<u> </u>
TITLE OR POSITIO	ON V	STATE A	ZIP CODE ▲
TITLE OR POSITIO	JN ▼	ı	ZIP CODE A
Banks or Other Deposit safety deposit boxes or Name of Bank, Broad	itories: List all banks or other depositories in whice	Telephone Number	
Banks or Other Deposit safety deposit boxes or Name of Bank, Depository, etc.	itories: List all banks or other depositories in whice maintains funds.	Telephone Number	
Banks or Other Deposit safety deposit boxes or Name of Bank, Depository, etc.	itories: List all banks or other depositories in whice maintains funds.	Telephone Number	

FEC Form 1S (Revised 02/2017)

(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
TEAM JOYCE FOR F	Organization, Affiliated Committee, Joint Fund PENNSYLVANIA	iraising Hepresentative	e, or Leadersnip PAC Spons
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
Relationship:	ATHENS CITY ▲	GA STATE ▲	30605 ZIP CODE ▲
		0	
	Affiliated Committee X Join by pame, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Spo
Pesignated Agent: Identify		nt Fundraising Representa	Ative Leadership PAC Spo
Designated Agent: Identify		nt Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identify		nt Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identify	by name, address (phone number – optional)		
Pesignated Agent: Identify	by name, address (phone number – optional)	STATE	Leadership PAC Spo
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or maintains.	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito Lafety deposit boxes or mail Lame of Bank, Openository, etc	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1.			
		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Spons
BIG DAN RODIMER	VICTORY COMMITTEE		
Mailing Address	50 S JONES BLVD STE 201		
Mailing Address			
	LAS VEGAS	ı NV ı	89107
51	CITY A	STATE A	ZIP CODE ▲
	CILY A	SIAIE	ZIP CODE A
		Fundraising Represent	ative Leadership PAC Spo
Connected	d Organization	Fundraising Represent	ative Leadership PAC Spo
Connecter Designated Agent: Identify	d Organization	Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	d Organization	Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	d Organization	Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name Mailing Address	d Organization Affiliated Committee X Joint by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connected Designated Agent: Identify Full Name	Affiliated Committee X Joint by by name, address (phone number – optional) CITY CITY		

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	l Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
HOUSE VICTORY F	'UND		
Mailing Address	2318 CURTIS STREET		
	DENVER	co	80205
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number – optional)		
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			710 0005 t
Full Name	CITY	STATE A	ZIP CODE A
Full Name _ _ Mailing Address	CITY A	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or many series.	CITY A CITY A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite to be	CITY ▲ CITY ▲ Pries: List all banks or other depositories in which aintains funds. of Santa Clarita 27441 Tourney Road	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite to be	CITY ▲ CITY ▲ Dries: List all banks or other depositories in which aintains funds. Def Santa Clarita	Telephone Number	

FEC Form 1S (Revised 02/2017)

r(h). Joint Fundrai	sing Participant:			
1.			FEC ID number	С
2.			FEC ID number	С
3			FEC ID number	С
4.			FEC ID number	С
Name of Any Connector		ed Committee, Joint F	undraising Representativ	re, or Leadership PAC Sponso
Mailing Address	228 S. WASHINGTO	ON ST.		
9	STE. 115			
5	ALEXANDRIA		VA VA	22314
Relationship:		CITY A	STATE A	ZIP CODE ▲
Full Name	1,,,,,,			
TITLE OR POSITIO	 	CITY A	STATE A	ZIP CODE A
TITLE OR POSITIO		CITY A	STATE Telephone Number	ZIP CODE A
Banks or Other Depos safety deposit boxes or	itories: List all banks or		Telephone Number	
Banks or Other Depos safety deposit boxes or Name of Bank, Depository, etc.	itories: List all banks or maintains funds. Bank 14 S Moger Avenue		Telephone Number	ts funds, holds accounts, rents
Banks or Other Depos safety deposit boxes or Name of Bank, Depository, etc.	itories: List all banks or maintains funds. Bank		Telephone Number	ZIP CODE ZIP CODE ts funds, holds accounts, rents

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

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ig Participant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE STE 101		
Relationship:	ATHENS CITY A	GA STATE ▲	30605 ZIP CODE ▲
	Affiliated Committee X Joint Ty by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identi		Fundraising Represent	Leadership PAC Spo
esignated Agent: Identi		Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi		Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi	y by name, address (phone number – optional)		
Pesignated Agent: Identi	y by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi Full Name Mailing Address	by by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or management.	y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Ganks or Other Deposite afety deposit boxes or make the proposition of Bank, depository, etc.	cories: List all banks or other depositories in which aintains funds. Type by name, address (phone number – optional) CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	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 Fundra	aising Representativ	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 2811		
Relationship:	LAKELAND CITY A	STATE A	33806
riciationship.	• =		
Connecte		Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)		
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Represents	Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee X Joint y by name, address (phone number – optional) CITY		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of the control of	d Organization Affiliated Committee X Joint 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 afety deposit boxes or make the compository, etc. Hanco	Affiliated Committee X Joint y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which a aintains funds. Ck Whitney Bank	STATE A	ZIP CODE A

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

onnected Or WIN Iress	ganization, A PO BOX 989 ARLINGTON	1	ommittee, s	Joint Fun	FEC	C ID number	C C	dership PAC Spo
WIN Iress	PO BOX 989	1	ommittee, v	Joint Fun	FEC	C ID number	C	dership PAC Spo
WIN Iress	PO BOX 989	1	ommittee, .	Joint Fun	FEC	CID number	С	dership PAC Spo
WIN Iress	PO BOX 989	1	ommittee,	Joint Fun				dership PAC Spo
WIN Iress	PO BOX 989	1	ommittee, c	Joint Fun	draising	Representativ	re, or Lead	dership PAC Spo
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[] o:	ARLINGTON							
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):						VA	222	:19
		С	ITY 🛦			STATE A		ZIP CODE ▲
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OSITION V		CIT	Y 🛦			STATE ▲		ZIP CODE ▲
					Telephone	e Number		
r	nt: Identify by	ess L	nt: Identify by name, address (phone ess CIT Depositories: List all banks or other	nt: Identify by name, address (phone number –	nt: Identify by name, address (phone number – optional) ess CITY Depositories: List all banks or other depositories in which	nt: Identify by name, address (phone number – optional) ess CITY Telephone Depositories: List all banks or other depositories in which the con	nt: Identify by name, address (phone number – optional) ess CITY ▲ STATE ▲ Telephone Number Depositories: List all banks or other depositories in which the committee deposit	nt: Identify by name, address (phone number – optional) ess CITY ▲ STATE ▲ Depositories: List all banks or other depositories in which the committee deposits funds, I

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

(h). Joint Fundraising	Participant:			
1.		FEC ID nu	mber C	
2.		FEC ID nu	mber C	
3.		FEC ID nu	mber C	
4.		FEC ID nu	mber C	
Name of Any Connected C	Organization, Affiliated Committee, Joint	Fundraising Represo	entative, o	r Leadership PAC Sponso
Mailing Address	PO BOX 7244			
	LITTLE ROCK		AR	72217
Relationship:	CITY A	ST	ATE 🛦	ZIP CODE ▲
Full Name				
Madina Addi	I		1 1 1	
Mailing Address				
Mailing Address				
Mailing Address			1 1	
	CITY A	STAT	TE A	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A	STAT Telephone Numb		ZIP CODE A
TITLE OR POSITION	les: List all banks or other depositories in v	Telephone Numb	er L	
TITLE OR POSITION Banks or Other Depositorical States of Bank, Depository, etc.	les: List all banks or other depositories in v	Telephone Numb	er L	

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

5(g) or (h).	Joint Fundraising	Participant:				
1.				FE	C ID number	С
2. [FE	C ID number	C
3. [<u> </u>		FE	C ID number	С
4. [FE	C ID number	C
S. Name	of Any Connected C	Organization, Affilia	ted Committee, Joint	Fundraising	Representativ	e, or Leadership PAC Sponsor
MAN	NN VICTORY FUN	ID				1 1 1 1 1 1 1 1 1 1 1 1 1
N	Mailing Address	PO BOX 1084				
					1 1 1 1	
		SALINA			KS	67402
F	Relationship:		CITY A		STATE A	ZIP CODE ▲
	Connected	Organization A	ffiliated Committee	Joint Fundra	aising Represent	ative Leadership PAC Sponsor
B. Design	nated Agent: Identify	by name, address (phone number – optior	nal)		
	nated Agent: Identify	by name, address (phone number – option	nal)		
Full		by name, address (phone number – option	nal)	1_1_1_1_1	
Full	I Name	by name, address (phone number – option	nal)		
Full	I Name	by name, address (phone number – option	nal)		
Full Mai	I Name		phone number – option	nal)	STATE A	ZIP CODE A
Full Mai	I Name					ZIP CODE A
Full Mai	I Name				STATE A	ZIP CODE A
Full Mai	I Name	es: List all banks of	CITY A	Telephor	ne Number	ZIP CODE zip code ts funds, holds accounts, rents
Full Mai	I Name	es: List all banks of	CITY A	Telephor	ne Number	

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

1 2						
2. 🔟				FEC	ID number	C
				FEC	ID number	С
3.				FEC	ID number	С
4.				FEC	ID number	С
Name of	Any Connected	Organization	Affiliated Committee Joint	Fundraising Re	enresentativ	e, or Leadership PAC Spons
	RNER VICTOR					
Mail	ling Address	PO BOX 672	237			
		TOPEKA			∟KS _	66667
Role	ationship:		CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	d Organization	Affiliated Committee	≺ Joint Fundraisi	ng Represent	tative Leadership PAC Spo
Designate Full Na	Connected ed Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Na	Connected				ng Represent	Leadership PAC Spo
Designate Full Na	Connected ed Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Nailing	Connected ed Agent: Identify lame ng Address	by name, add	lress (phone number – optio			
Designate Full Na Mailing	Connected ed Agent: Identify	by name, add			STATE A	Leadership PAC Spo

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

of ²³² Page FEC Form 1S (Revised 02/2017) 5(g) or (h). Joint Fundraising Participant: C FEC ID number C FEC ID number C FEC ID number 3. C FEC ID number Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6. Claudia Tenney for Congress Victory Fund **PO BOX 244** Mailing Address CLINTON 13323 Relationship: ZIP CODE A CITY A STATE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number - optional) 8. Full Name Mailing Address ZIP CODE CITY A STATE A TITLE OR POSITION ▼ Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address

CITY A

STATE A

ZIP CODE A

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

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

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.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	831 LINWOOD CT		
	Relationship:	BIRMINGHAM CITY	AL STATE A	35222 ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint I	Fundraising Represent	ative Leadership PAC Sponsor
8.		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 Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A Tele ries: List all banks or other depositories in which the intains funds.	ephone Number	ts funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A Tele ries: List all banks or other depositories in which the intains funds.	ephone Number	ts funds, holds accounts, rents
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A Tele ries: List all banks or other depositories in which the intains funds.	ephone Number	ts funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A Tele ries: List all banks or other depositories in which the intains funds.	ephone Number	ts funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A Tele ries: List all banks or other depositories in which the intains funds.	ephone Number	ts funds, holds accounts, rents

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

r(h). Joint F u	andraising i	articipant:				
1.				F	EC ID number	С
2.				F	EC ID number	С
3.				F	EC ID number	C
4.				F	EC ID number	С
Name of Any Co	nnected Org	anization, Affili	ated Committee, Joir	nt Fundraisin	g Representative	e, or Leadership PAC Sponsor
DIANA VICTO	ORY FUND					
	. [PO BOX 7208				
Mailing Add	ress					
	L					
	Ľ	KINGSPORT			TN	37664
Relationship):		CITY A		STATE ▲	ZIP CODE ▲
Designated Agen	it. identity by	name, address	(phone number – opti	ioriai)		
Full Name						
Full Name	66					
Full Name	ss _					
_	ss L					
_	ss					
_	L		CITY A		STATE A	ZIP CODE A

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

r(h). Joint Fundra i	sing Participant:				
1		<u> </u>	FEC IC	number	С
2		<u> </u>	FEC IC) number	С
3.		1 1 1 1 1 1 1 1	FEC IC	number	С
4.			FEC ID) number	C
Name of Any Connect	ed Organization, Affil	iated Committee Joint F		oresentativ	e, or Leadership PAC Sponso
GUS BILIRAKIS V	_				, , , , , , , , , , , , , , , , , , ,
Mailing Address	PO BOX 2485				
	SPRINGFIELD			L VA _	22152
Relationship:		CITY A		STATE A	ZIP CODE ▲
Full Name					
Mailing Address					
Maining / Madrood					
Walling / Radioso	1			1 1 1	
Walling Address			<u> </u>		1
		CITY A		STATE A	ZIP CODE A
TITLE OR POSITI		CITY A	Telephone N		ZIP CODE A

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

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

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.	-	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	BIGGS VICTORY CO			
	Mailing Address	228 S WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA I	22314
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	- undraising Representa	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	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	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 CITY Tele ries: List all banks or other depositories in which the intains funds.	ephone Number	s funds, holds accounts, rents
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY CITY Tele ries: List all banks or other depositories in which the intains funds.	ephone Number	s funds, holds accounts, rents
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the intains funds.	ephone Number	s funds, holds accounts, rents

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

r(h). Joint Fundraising	Participant:			
1.		FEC	ID number	С
2.		FEC	ID number	С
3.		FEC	ID number	С
4.		FEC	ID number	С
Name of Ame Companied	Ourseline Affiliated Committee	Laint Frankrisian B		and and analysis DAO Common
WAGNER VICTORY	Organization, Affiliated Committee, COMMITTEE	Joint Fundraising R	epresentativ	e, or Leadership PAC Sponso
Mailing Address	PO BOX 183			
Mailing Address				
	HUDSON		ı WI ı	54016
Relationship:	CITY A		STATE A	ZIP CODE ▲
	Organization Affiliated Committee	e X Joint Fundraisi		
Full Name				
Mailing Address				
	1	1	1 . 1	1
TITLE OR POSITION	▼ CITY ▲		STATE ▲	ZIP CODE ▲
TITLE OR POSITION	CITY A	Telephone		ZIP CODE A
	V		Number	
	ies: List all banks or other depositori		Number	
Banks or Other Depositor	ies: List all banks or other depositori		Number	
Banks or Other Depositor safety deposit boxes or main Name of Bank,	ies: List all banks or other depositori		Number	
Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositori		Number	
Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositori		Number	

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

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	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
SALAZAR VICTORY	COMMITTEE		
Mailing Address	47 FLINTLOCK DR		
	SHIRLEY	, NY	, 11967
		STATE A	ZIP CODE ▲
Relationshin:	CITY A	SIAIL	ZIF CODE A
	clTY ▲ ed Organization	t Fundraising Represent	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identify Full Name Mailing Address	Affiliated Committee X Joint fy by name, address (phone number – optional)		
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint fy by name, address (phone number – optional) CITY	STATE A	Leadership PAC Spo

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	C
3.		FEC ID number	C
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
ELISE VICTORY FUN	ID 		
Mailing Address	PO BOX 500		
Relationship:	GLEN FALLS CITY	NY STATE A	12801 ZIP CODE ▲
		t Fundraising Represent	
Connected	by name, address (phone number - optional)		
	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)		
Pesignated Agent: Identify Full Name _ _ _	by name, address (phone number – optional)		
Pesignated Agent: Identify Full Name _ _ _	by name, address (phone number – optional)		
Pesignated Agent: Identify Full Name _ _ _	CITY	STATE A	ZIP CODE A
Full Name LIDENSITION	CITY A	STATE A	ZIP CODE A
Pesignated Agent: Identify Full Name _ _ Mailing Address TITLE OR POSITION	CITY A CITY A ies: List all banks or other depositories in which intains funds.	elephone Number	es funds, holds accounts, rents
Full Name	CITY CITY Te ies: List all banks or other depositories in which intains funds.	the committee deposit	es funds, holds accounts, rents
Full Name	CITY CITY Te ies: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents

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	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representati	ve, or Leadership PAC Spons
SERVANT LEADERS	SHIP FUND		
Mailing Address	824 S. MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE A	X ZIP CODE ▲
	y by name, address (phone number – optiona	···/	
Full Name			
Full Name			
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A		ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	sits funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	sits funds, holds accounts, rents

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

	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 C	Organization, Affiliated Committee, Joint F	undraising Representati	ve, or Leadership PAC Sponso
Mailing Address	PO BOX 21315		
	OKLAHOMA CITY	OK OK	73156
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
•	by name, address (phone number - optional	,	
Full Name		, 	
		, 	
Full Name			
Full Name			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name	CITY A es: List all banks or other depositories in w	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorical particular deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY A es: List all banks or other depositories in w	STATE A Telephone Number	

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

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

1.						
۱ م				FEC	ID number	C
2. 🖳				FEC	ID number	С
3.				FEC	ID number	С
4.				FEC	ID number	С
Name of	Any Connected	Organization, A	Affiliated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Spons
GARB	ARINO VICTO	RY FUND				
Mail	ing Address	PO BOX 101				
		BAYPORT			NY	11705
			CITY A		STATE ▲	ZIP CODE ▲
)esignate	d Agent: Identify	d Organization	Affiliated Committee	S Joint Fundraisi	ng Represent	Leadership PAC Spo
Designate Full Na	Connected de Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Na	Connected Connected Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Na	Connected de Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Na Mailing	Connected and Agent: Identify the Agent Agent Address	by name, addre	ess (phone number – optio			
Designate Full Na Mailing	Connected de Agent: Identify	by name, addre			STATE A	Leadership PAC Spo

Optional Supplemental Information FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8 and/or 9

Page	of	232
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5(g) or (h). Joint Fundraising Participant: C FEC ID number C FEC ID number C FEC ID number C FEC ID number Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6. **BURGESS OWENS VICTORY COMMITTEE** 824 S MILLEDGE AVE STE 101 Mailing Address **ATHENS** 30605 Relationship: ZIP CODE A CITY A STATE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number - optional) 8. Full Name Mailing Address ZIP CODE A CITY A STATE A TITLE OR POSITION ▼ Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address CITY A STATE A ZIP CODE A

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

5(g) or ((h). Joint Fundraisir	ng Participant:			
	1.		FEC	ID number	C
	2		FEC	ID number	C
	3.		FEC	ID number	С
	4.		FEC	ID number	C
-					
6. N		Organization, Affiliated Committee, Jo	oint Fundraising R	epresentativ	e, or Leadership PAC Sponsor
	TDOCX				
	Mailing Address	PO BOX 30844			
		BETHESDA	.	MD	20824
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee	X Joint Fundrais	ing Representa	ative Leadership PAC Sponsor
_					
		v by name address (phane number a	1		
8. D	Designated Agent: Identif	y by name, address (phone number - o	ptional)		
8. D	Full Name	y by hame, address (phone humber – o	ptional)		
8. D			ptional)		
8. D	Full Name		ptional)		
8. D	Full Name	y by name, address (priorie number – o	ptional)		
8. Д	Full Name	CITY A	ptional)	STATE A	ZIP CODE A
8. D	Full Name	CITY A			ZIP CODE A
8. D	Full Name	CITY A	ptional) Telephone		ZIP CODE A
9. B s.	Full Name Mailing Address TITLE OR POSITION	CITY A	Telephone	Number	
9. B s.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or m	CITY A	Telephone	Number	
9. B s.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or marks and bank,	CITY A	Telephone	Number	
9. B s	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second state of Bank, Depository, etc.	CITY A	Telephone	Number	
9. B s	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second state of Bank, Depository, etc.	CITY A	Telephone	Number	

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

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

5(g)	or(h). Joint Fundraisi	ng Participant:		
	1.		FEC ID number	C
	2		FEC ID number	C
	3		FEC ID number	C
	4.		FEC ID number	C
0	Name of Any Connected	Oversited Affiliated Committee Isiat Fund	volcina Donyo contotiva	ar Landarshin DAC Channer
6.	COMER VICTORY F	Organization, Affiliated Committee, Joint Fund UND	raising nepresentative	e, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connecte	d Organization	t Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identif	y by name, address (phone number - optional)		
8.	Designated Agent: Identification 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	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name Mailing Address TITLE OR POSITION	CITY A		ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION	CITY A Tories: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m	CITY A Tories: List all banks or other depositories in which	elephone Number	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito	CITY ▲ CITY ▲ Tories: List all banks or other depositories in which aintains funds.	elephone Number	s funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank,	CITY ▲ CITY ▲ Tories: List all banks or other depositories in which aintains funds.	elephone Number the committee deposit	s funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	CITY ▲ CITY ▲ Tories: List all banks or other depositories in which aintains funds.	elephone Number the committee deposit	s funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	CITY ▲ CITY ▲ Tories: List all banks or other depositories in which aintains funds.	elephone Number the committee deposit	s funds, holds accounts, rents

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

Optional	Suppler	nental	ln	formati	or
for Lines	s 5(g) or	(h), 6,	8	and/or	9

1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint F	undraising Representat	ive, or Leadership PAC Spons
WAGNER-MCHENF	RY VICTORY		
	ı 6269 LEESBURG PIKE		
Mailing Address			
	B7 		
	FALLS CHURCH	VA	22044
Relationship:	CITY ▲	STATE A	▲ ZIP CODE ▲
	Affiliated Committee X fy by name, address (phone number – option	Joint Fundraising Represe	ntative Leadership PAC Spo
			ntative Leadership PAC Spo
Designated Agent: Identi			ntative Leadership PAC Spo
Designated Agent: Identi			ntative Leadership PAC Spo
Designated Agent: Identi			ntative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – options		ntative Leadership PAC Spo
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – options	al)	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – options	al) STATE	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in w	STATE A	ZIP CODE A
Pesignated Agent: Identic Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or mailing and mailing	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in w	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in waintains funds.	STATE A	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A

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

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

1.						
٠ .				FEC	ID number	C
2. 🖳				FEC	ID number	С
3.				FEC	ID number	С
4.				FEC	ID number	С
Name of A	Any Connected	Organization,	Affiliated Committee, Joint	t Fundraising R	epresentativ	e, or Leadership PAC Spons
MACE	MAJORITY FU	JND				
Maili	ing Address	824 S MILLE	EDGE AVE			
		STE. 101				
		ATHENS			GA	30605
			CITY A		STATE ▲	ZIP CODE ▲
		d Organization		X Joint Fundraisi	ng Represent	Leadership PAC Spo
Designate Full Na	Connected ded Agent: Identify		Affiliated Committee		ng Represent	Leadership PAC Spo
Designate Full Na	Connected connected Agent: Identify		Affiliated Committee		ng Represent	Leadership PAC Spo
Designate Full Na	Connected ded Agent: Identify		Affiliated Committee		ng Represent	Leadership PAC Spo
Designate Full Na Mailing	Connected and Agent: Identify the Agent Agent Address	by name, add	Affiliated Committee			
Designate Full Na Mailing	Connected ded Agent: Identify	by name, add	Affiliated Committee		STATE A	Leadership PAC Specialists

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

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

(h). Joint Fundrais	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
Name of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE		
	STE 101		
Relationship:	ATHENS CITY A	GA STATE ▲	30605 ZIP CODE ▲
	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY CITY Teleprocess List all banks or other depositories in which naintains funds.	STATE A elephone Number	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY CITY Teleprocess List all banks or other depositories in which naintains funds.	STATE A elephone Number	ZIP CODE A ts funds, holds accounts, rents

Optional Supplemental Information

Page	of	232
raue	U	

for Lines 5(g) or (h), 6, 8 and/or 9 FEC Form 1S (Revised 02/2017) 5(g) or (h). Joint Fundraising Participant: C FEC ID number C FEC ID number C FEC ID number C FEC ID number Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6. **GRANGER VICTORY COMMITTEE** PO BOX 9891 Mailing Address ARLINGTON 22219 Relationship: ZIP CODE A CITY A STATE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number - optional) 8. Full Name Mailing Address ZIP CODE A CITY A STATE A TITLE OR POSITION ▼ Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address

CITY A

STATE A

ZIP CODE A

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

1				
2			FEC ID number	C
<u></u>			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
lame of Any Connected	Organization, Affiliated Com	mittee, Joint Fundr	aising Representativ	e, or Leadership PAC Spon
MIKE GARCIA VICT	ORY FUND			
	0070 IDVINE CENTED DDIV	F #450		
Mailing Address	9070 IRVINE CENTER DRIV	E #150		
	IRVINE		CA	92618
Relationship:	CITY	′ ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Co		Fundraising Represent	tative Leadership PAC Sp
			Fundraising Represent	tative Leadership PAC Sp
esignated Agent: Identi			Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi			Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi			Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	y by name, address (phone nu	mber – optional)	Fundraising Represent	Leadership PAC Sp
Pesignated Agent: Identi	y by name, address (phone nu	mber – optional)		

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

FEC Form 1S (Revised 02/2017)

1						
٠ ا ،				FEC	ID number	C
2				FEC	ID number	С
3.				FEC	ID number	С
4.		1 1 1 1 1		FEC	ID number	С
Name of A	Any Connected	Organization.	Affiliated Committee, Joint	Fundraising R	epresentativ	re, or Leadership PAC Spons
	CARL VICTO	_				
Mailir	ng Address	PO BOX 852	2138			
		MOBILE			AL	36685
			CITY A		STATE A	ZIP CODE ▲
		d Organization		≺ Joint Fundraisi	ng Represent	tative Leadership PAC Sp
Designated Full Na	Connected d Agent: Identify		Affiliated Committee		ng Represent	tative Leadership PAC Spo
Designated Full Na	Connected d Agent: Identify		Affiliated Committee		ng Represent	tative Leadership PAC Spo
Designated Full Na	Connected d Agent: Identify		Affiliated Committee		ng Represent	Leadership PAC Spo
Designated Full Na	Connected d Agent: Identify		Affiliated Committee			
Designated Full Na Mailing	Connected d Agent: Identify	by name, add	Affiliated Committee		STATE A	Leadership PAC Sports and Leadership PAC Spo

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

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraising	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 F	undraising Representative	e, or Leadership PAC Sponsor
TEAM MOORE JOINT	FUNDRAISING COMMITTEE		
Mailing Address	370 EAST SOUTH TEMPLE STE 580		
	1		
	SALT LAKE CITY	, UT ,	84111
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		Joint Fundraising Represent	
Designated Agent: Identify	by name, address (phone number - optiona	1)	
Designated Agent: Identify	by name, address (phone number – optiona	. I)	
	by name, address (phone number – optiona	i)	
Full Name	by name, address (phone number – optiona	I)	
Full Name	by name, address (phone number – optiona	I)	
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A

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

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
lame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
PFLUGER VICTOR	Y FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		Fundraising Represent	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connected Connected Resignated Agent: Identification	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connecte resignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint for by name, address (phone number – optional) CITY		
Connected Agent: Identification of the Identification of the Identification of the Identification of th	Affiliated Committee X Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A lephone Number the committee deposit	ZIP CODE A
Connected Resignated Agent: Identification of Bank, Repository, etc.	Affiliated Committee X Joint fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A lephone Number the committee deposit	ZIP CODE A

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	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected , NEHLS VICTORY	l Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spon
Mailing Address	1612 CRABB RIVER RD		
	RICHMOND		77469
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
		oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
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 pries: List all banks or other depositories in white aintains funds.	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 management and ma	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in white aintains funds.	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 pries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number	ZIP CODE A

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

	g Participant:			
1.		FEC	D number	С
2.		FEC	D number	C
3.		FEC	D number	С
4.		FEC	D number	С
ame of Any Connected	Organization, Affiliated Committee,	Joint Fundraising Re	epresentative	e. or Leadership PAC Spon
TEAM RONNY			1 1 1	
Mailing Address	PO BOX 51522			
	AMARILLO	<u></u>	TX	79159
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	Affiliated Committee by name, address (phone number –	_	ng Representa	Leadership PAC Sp
			ng Representa	Leadership PAC Sp
esignated Agent: Identify			ng Representa	Leadership PAC Sp
esignated Agent: Identify			ng Representa	Leadership PAC Sp
esignated Agent: Identify			ng Representa	Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number –		STATE A	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number –		STATE A	
esignated Agent: Identify Full Name	cies: List all banks or other depositorinatins funds.	optional) Telephone	STATE A Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc	cies: List all banks or other depositorinatins funds.	optional) Telephone	STATE A Number	ZIP CODE A

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

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lome of Any Connector	Organization, Affiliated Committee, Joint Fur	advaicing Denverontative	o ar Landarchin DAC Spana
TONY GONZALES		idiaising nepresentative	e, or Leadership PAC Spons
Mailing Address	12000 STARCREST DR		
	STE 101		
	SAN ANTONIO		78247
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint J	oint Fundraising Representa	ative Leadership PAC Sp
		oint Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi		oint Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi		oint Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi		oint Fundraising Representation	Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – optional)	oint Fundraising Representation	Leadership PAC Spo
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	cories: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name	cories: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

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

r(h). Joint Fundraising	y Participant:		
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 I	Fundraising Representativ	re, or Leadership PAC Sponso
SHEDD VICTORY FU	ND	<u> </u>	
Mailing Address	PO BOX 365		
	MCLEAN	VA	22101
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identify Full Name	by name, address (phone number - option	al)	
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
	ies: List	all banks or other depositories in w	Telephone Number all banks or other depositories in which the committee deposit

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	С
4.		FEC	ID number	С
Name of Any Connected	Organization, Affiliated Committee, D	Joint Fundraising F	Representativ	re, or Leadership PAC Spons
Mailing Address	9070 IRVINE CENTER DRIVE			
	SUITE 150			
Dalatianakin	IRVINE		CA	92618
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Designated Agent: Identif	d Organization Affiliated Committee	_	sing Represent	tative Leadership PAC Spo
	_		sing Represent	tative Leadership PAC Spo
Pesignated Agent: Identif	_		sing Represent	Leadership PAC Spo
Pesignated Agent: Identif	_		sing Represent	Leadership PAC Spo
Pesignated Agent: Identification Full Name Mailing Address	y by name, address (phone number –		STATE A	Leadership PAC Spo
Pesignated Agent: Identif	y by name, address (phone number –		STATE A	
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – CITY CITY ries: List all banks or other depositor aintains funds.	- optional) Telephone	STATE A Number	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second process of the proposition of Bank, Depository, etc.	y by name, address (phone number – CITY CITY ries: List all banks or other depositor aintains funds.	Telephone ies in which the com	STATE A Number	ZIP CODE A ts funds, holds accounts, rents

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

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	С
4.		FEC ID number	С
lame of Any Connected	l Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
GOODEN VICTORY	'FUND		
Mailing Address	75 S HIGH ST		
	STE. 4		
	DUBLIN	OH	43017
esignated Agent: Identi	CITY ▲ ed Organization	STATE ▲ nt Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Sp
Connecte Con	ed Organization Affiliated Committee X Joi		
Connected Connected Pesignated Agent: Identification	ed Organization Affiliated Committee X Joi		
esignated Agent: Identi	ed Organization Affiliated Committee X Joi		
esignated Agent: Identi	Affiliated Committee X Joint J	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Joint J		

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

1						
1				FEC	ID number	C
2				FEC	ID number	С
3				FEC	ID number	C
4.				 FEC	ID number	С
Name of A	Any Connected	Organization, A	ffiliated Committee, Join	t Fundraising R	Representativ	re, or Leadership PAC Spon
	CK MAJORITY					
Maili	ng Address	228 S WASHI	NGTON ST STE 115			
		ALEXANDRIA	\		L VA	22314
	tionchin:		CITY A		STATE A	ZIP CODE ▲
Relat	Connected	Organization by name, addre	Affiliated Committee	X Joint Fundrais	ing Represent	tative Leadership PAC Sp
Designated Full Na	Connected d Agent: Identify				ing Represent	tative Leadership PAC Sp
Designated Full Na	Connected d Agent: Identify				ing Represent	tative Leadership PAC Sp
Designated Full Na	Connected d Agent: Identify				ing Represent	tative Leadership PAC Sp
Designated Full Na	Connected d Agent: Identify		ess (phone number – optic			
Designated Full Na Mailing	Connected d Agent: Identify	by name, addre			STATE A	Leadership PAC Sp

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	C
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
MCCARTHY VICTO	RY FUND 		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	Leadership PAC Sp
Connecte	d Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Join	nt Fundraising Represente	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee X Join by name, address (phone number – optional)	STATE	Leadership PAC Sp
Connecte esignated Agent: Identif	Affiliated Committee X Join by pame, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Join by particular of the state of	STATE A	ZIP CODE A
connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Join by particular of the state of	STATE A Telephone Number	ZIP CODE A

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

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	C
4.			FEC ID number	C
	of Any Connected O	rganization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
1	Mailing Address	8505 TECHNOLOGY FOREST PLACE		
		SUITE 702		
ı	Relationship:	THE WOODLANDS CITY	TX STATE ▲	77381 ZIP CODE ▲
ſ	neiationship.	CITY	SIAIE	ZIP CODE A
	nated Agent: Identify I	by name, address (phone number – optional)	111111	
Fu		oy name, address (phone number – optional)		
Fu	II Name	oy name, address (phone number – optional)		
Fu	II Name	oy name, address (phone number – optional)		
Fu Ma	II Name	CITY A	STATE A	ZIP CODE A
Fu Ma	II Name	CITY A	STATE A	ZIP CODE A
Fu Ma T Banks safety Name Deposi	II Name	CITY CITY Te es: List all banks or other depositories in which tains funds.	lephone Number	s funds, holds accounts, rents

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

5(g) or (h	n). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6. N a	-	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
[TEAM MCHENRY			
l				
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	, , , VA ,	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint F	Fundraising Represent	Leadership PAC Sponsor
8. De	esignated Agent: Identify	by name, address (phone number - optional)		
8. D e	esignated Agent: Identify	by name, address (phone number – optional)		
8. D e		by name, address (phone number – optional)		
8. De	Full Name	by name, address (phone number – optional)		
8. D e	Full Name	by name, address (phone number – optional)		
8. De	Full Name	CITY	STATE A	ZIP CODE A
8. De	Full Name	CITY A	STATE A	ZIP CODE A
—- 9. Ba sa	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or material deposit boxes or material depository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the dintains funds.	ephone Number	s funds, holds accounts, rents
—- 9. Ba sa	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	CITY CITY Tele ries: List all banks or other depositories in which the dintains funds.	ephone Number	s funds, holds accounts, rents
—- 9. Ba sa	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or material deposit boxes or material depository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the dintains funds.	ephone Number	s funds, holds accounts, rents

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

h). Joint Fundrais i	ing i artiolpariti		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e. or Leadership PAC Spons
NUNES VICTORY F			
Mailing Address	PO BOX 6545		
	VISALIA	CA	93290
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ed Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional		ative Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional CITY A CITY A ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional CITY A CITY A ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent

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

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FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundra	ising 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 Connec	ted Organization, Affiliated Committee, Joint Fundra	oloina Donrocontativ	o or Londovskin DAC Sponsov
	TORY COMMITTEE	aising nepresentative	e, or Leadership FAC Sponsor
Mailing Address	228 S WASHINGTON STREET #115		
	ALEXANDRIA	, , VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Represent	Leadership PAC Sponsor
B. Designated Agent: Ide	Affiliated Committee X Joint Intify by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sponsor
B. Designated Agent: Ide		Fundraising Represent	Leadership PAC Sponsor
B. Designated Agent: Ide		Fundraising Represent	Leadership PAC Sponsor
B. Designated Agent: Ide	ntify by name, address (phone number – optional)		
B. Designated Agent: Ide	ntify by name, address (phone number – optional)	Fundraising Represent	
B. Designated Agent: Ide Full Name Mailing Address	ntify by name, address (phone number – optional) CITY ▲		
Banks or Other Deposafety deposit boxes or Name of Bank, Depository, etc.	ntify by name, address (phone number – optional) CITY ▲ CITY ▲ Sitories: List all banks or other depositories in which the	STATE A	ZIP CODE A
Banks or Other Deposafety deposit boxes or Name of Bank,	ntify by name, address (phone number – optional) CITY ▲ CITY ▲ Sitories: List all banks or other depositories in which the	STATE A	ZIP CODE A
Banks or Other Deposafety deposit boxes or Name of Bank, Depository, etc.	ntify by name, address (phone number – optional) CITY ▲ CITY ▲ Sitories: List all banks or other depositories in which the	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 9

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

5(g)	or(h). Joint Fundraisir	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 HUDSON FREEDON	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON ST STE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8.		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	y by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name _ _ Mailing Address	CITY A	STATE A	ZIP CODE A
 8. 9. 	Full Name Mailing Address TITLE OR POSITION	CITY A Tel ries: List all banks or other depositories in which t	lephone Number	s funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or mail	CITY CITY ries: List all banks or other depositories in which taintains funds.	lephone Number	s funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY ries: List all banks or other depositories in which taintains funds.	lephone Number	s funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY ries: List all banks or other depositories in which taintains funds.	he committee deposits	s funds, holds accounts, rents

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

		Participant:					
1				FEC I	D number	С	
2				FEC I	D number	С	
3				FEC I	D number	С	
4.				FEC I	D number	С	
lame of Ar	ny Connected C	Organization, Aff	iliated Committee, Joint	Fundraising Re	presentative	e, or Leadership P	AC Spons
STIVER	S VICTORY C	OMMITTEE	<u> </u>				
		ı 228 S WASHIN	IGTON ST STE 115				
Mailing	g Address						
		AL EVANDENA			1/4	00044	
		ALEXANDRIA			L VA	22314]-[
Relation	onship:		CITY A		STATE ▲	ZIP C	ODE A
esignated	Connected Agent: Identify		Affiliated Committee	≺ Joint Fundraisir	g riepieseille	Zaive E Education	iip FAC Sp
esignated Full Nan	Agent: Identify				y riepresent	Leudoloi	
	Agent: Identify				y riepresenta	Leudolo	III FAC SP
Full Nan	Agent: Identify				y riepresenta		nip PAC Sp
Full Nan	Agent: Identify				y riepresenta		
Full Nan	Agent: Identify	by name, addres			STATE A	ZIP CO	
Full Nan	Agent: Identify ne Address	by name, addres	es (phone number – optio		STATE A		

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

Page	of	232
i ago	<u> </u>	

FEC Form 1S (Revised 02/2017) 5(g) or (h). Joint Fundraising Participant: C FEC ID number C FEC ID number C FEC ID number C FEC ID number Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6. SCHWEIKERT VICTORY COMMITTEE 228 S WASHINGTON STREET STE 115 Mailing Address ALEXANDRIA 22314 Relationship: ZIP CODE A CITY A STATE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number - optional) 8. Full Name Mailing Address ZIP CODE CITY A STATE A TITLE OR POSITION ▼ Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address

CITY A

STATE A

ZIP CODE A

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

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

5(g) o	or(h). Joint Fundraisi r	ng 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	Organization, Affiliated Committee, Joint Fund	draising Representative	e. or Leadership PAC Sponsor
	SCALISE LEADERS			
	Mailing Address	PO BOX 9891		
		ARLINGTON	, , VA	22219
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identif	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
			STATE A	ZIP CODE A
	TITLE OR POSITION	pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents
	Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents
	TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank,	pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents

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

r(h). Joint Fundraisi r	ng 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	Organization, Affiliated Committee, Joint F	undraising Representativ	re, or Leadership PAC Spons
MCCAUL VICTORY			,
Mailing Address	PO BOX 341027		
	AUSTIN	TX L	78734
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
Connecte Designated Agent: Identif	d Organization Affiliated Committee X y by name, address (phone number – optiona	Joint Fundraising Represent	
Designated Agent: Identif			
Designated Agent: Identif			
Designated Agent: Identif			
Designated Agent: Identification Full Name Mailing Address	y by name, address (phone number – optiona		ZIP CODE A
Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optiona	l)	
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors Safety deposit boxes or mail	y by name, address (phone number – optional control of the control	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional control of the control	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposites Safety deposit boxes or mainly become a safety deposited by the safe	y by name, address (phone number – optional control of the control	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents

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

ress	75 S HIGH STE. 4 DUBLIN Organization	Affiliated Comn CITY Affiliated Co dress (phone nur	ommittee .	F F F F F F F F F F F F F F F F F F F	EC ID number EC ID number EC ID number GREPTESENTA OH STATE	r C r C tive, or Le	3017 ZIP CC	-
ress Connected to the literature of the literat	75 S HIGH STE. 4 DUBLIN Organization	ST CITY Affiliated Co	ommittee .	F Fundraisin	EC ID number g Representa	r C tive, or Le	3017 ZIP CC	- L L L
ress Connected to the literature of the literat	75 S HIGH STE. 4 DUBLIN Organization	ST CITY Affiliated Co	ommittee .	t Fundraisin	g Representa	tive, or Le	3017 ZIP CC	- L L L
ress Connected to the literature of the literat	75 S HIGH STE. 4 DUBLIN Organization	ST CITY Affiliated Co	ommittee .	t Fundraisin	g Representa	tive, or Le	3017 ZIP CC	- L L L
ress Connected to the literature of the literat	75 S HIGH STE. 4 DUBLIN Organization	ST CITY Affiliated Co	ommittee .	X Joint Fund	OH	4:	3017 ZIP CC	- L L L
ess Connected	75 S HIGH STE. 4 DUBLIN Organization	CITY Affiliated Co	ommittee		STATE	<u> </u>	ZIP CO	
: Connected to	STE. 4 DUBLIN Organization	CITY Affiliated Co	ommittee		STATE	<u> </u>	ZIP CO	
: Connected to	STE. 4 DUBLIN Organization	CITY Affiliated Co	ommittee		STATE	<u> </u>	ZIP CO	
connected to the control of the cont	DUBLIN Organization	Affiliated Co	ommittee		STATE	<u> </u>	ZIP CO	
connected to the control of the cont	Organization	Affiliated Co	ommittee		STATE	<u> </u>	ZIP CO	
connected to the control of the cont		Affiliated Co	ommittee					
t: Identify					draising Represe	entative	Leadershi	p PAC Spo
SS								
		OITY					710.005	
OSITION \	7	CITY			SIAIE		ZIP COL)E A
				Telepho	one Number			
	Depositorio	DSITION ▼ Depositories: List all bes or maintains funds.	Depositories: List all banks or other de	Depositories: List all banks or other depositories in es or maintains funds.	Depositories: List all banks or other depositories in which the desor maintains funds.	Telephone Number Depositories: List all banks or other depositories in which the committee depositor or maintains funds.	Telephone Number Depositories: List all banks or other depositories in which the committee deposits funds es or maintains funds.	Telephone Number Telephone Number

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

FEC Form 1S (Revised 02/2017)

(h). Joint Fundrais	ng Participant:			
1.		FE	C ID number	С
2.		FE	C ID number	С
3.		FE.	C ID number	С
4.		FE.	C ID number	C
Name of Any Connected	l Organization, Affiliated Committ	ee, Joint Fundraising	Representativ	e, or Leadership PAC Spons
TEAM BOEBERT JO	DINT FUNDRAISING COMMIT	EE		
Mailing Address	PO BOX 752			
	RIFLE		l co l	81652
Relationship:	CITY A		STATE A	ZIP CODE ▲
	ed Organization Affiliated Comm		aising Represent	Leadership PAC Spo
	_		aising Represent	Leadership PAC Spo
Designated Agent: Ident	_		aising Represent	Leadership PAC Spo
Designated Agent: Ident	_		aising Represent	Leadership PAC Spo
Designated Agent: Ident	_		aising Represent	Leadership PAC Spo
Designated Agent: Ident	fy by name, address (phone number		sising Represent	Leadership PAC Spo
Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number	er — optional)		
Pesignated Agent: Ident Full Name	fy by name, address (phone number of the control of	er – optional)	STATE Ane Number	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Identification of Bank, Depository, etc.	fy by name, address (phone number of the control of	Telephor	STATE Ane Number	ZIP CODE A ts funds, holds accounts, rents

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

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	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
FALLON VICTORY	FUND		
Mailing Address	PO BOX 3653		
	DUBLIN	OH	43016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte Pesignated Agent: Identi	d Organization Affiliated Committee X Joi	nt Fundraising Representa	
Pesignated Agent: Identi			
Designated Agent: Identi			Leadership PAC Spo
Pesignated Agent: Identi			
Pesignated Agent: Identi	y by name, address (phone number – optional)		
Pesignated Agent: Identi	by by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name L Mailing Address	by by name, address (phone number – optional) CITY		
Pesignated Agent: Identi Full Name	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains 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 Farticipant.			
1.		FEC ID no	umber	C
2.		FEC ID nu	umber	C
3.		FEC ID no	umber	C
4.		FEC ID nu	umber	C
Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Repres	entative,	or Leadership PAC Spons
Mailing Address	P.O. BOX 6545			
	VISALIA		CA	93290
Relationship:	CITY ▲	S	ΓΑΤΕ ▲	ZIP CODE ▲
	Affiliated Committee Affiliated Committee fy by name, address (phone number – option	S Joint Fundraising Re	epresentati	ve Leadership PAC Spo
Designated Agent: Identi			epresentati	ve Leadership PAC Spo
Designated Agent: Identi			epresentati	ve Leadership PAC Spo
Designated Agent: Identi			epresentati	ve Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optio	nal)		
Designated Agent: Identi	fy by name, address (phone number – optio	nal)	epresentati	ve Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optio	nal)	TE A	
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optio	nal) STA	TE A deposits	ZIP CODE A funds, holds accounts, rents
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	fy by name, address (phone number – optio	Telephone Numb	TE A deposits	ZIP CODE A funds, holds accounts, rents

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

Opti	ional S	Supp	lem	ent	al	ln	formati	or
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	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
BETH VICTORY FUI			
Mailing Address	PO BOX 630167		
	IRVING	TX	75063
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte Designated Agent: Identif	y by name, address (phone number – optional)	
Designated Agent: Identif	y by name, address (phone number – optional)	
Designated Agent: Identif	y by name, address (phone number – optional		
Designated Agent: Identif	y by name, address (phone number – optional		
Designated Agent: Identif Full Name Mailing Address	CITY A	STATE A	ZIP CODE A
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION	CITY A		ZIP CODE A
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION	CITY A cries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	es funds, holds accounts, rents
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the period of Bank, Depository, etc.	CITY A cries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	es funds, holds accounts, rents

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

Connected OCH VICTORY Address Chip:			FEC FEC	ID number ID number ID number ID number Eepresentative	C C C e, or Leadership PAC Spons
ch VICTORY	FUND 824 S MILLEDO ST 101		FEC FEC	ID number	C
ch VICTORY	FUND 824 S MILLEDO ST 101		FEC	ID number	C
ch VICTORY	FUND 824 S MILLEDO ST 101				
ch VICTORY	FUND 824 S MILLEDO ST 101		nt Fundraising R	epresentative	e, or Leadership PAC Spons
ch VICTORY	FUND 824 S MILLEDO ST 101				
hip:	ST 101	GE AVE			
hip:	ST 101	SE AVE			
-					
-	ATHENS				
-				GA	30605
_		CITY A		STATE ▲	ZIP CODE ▲
	<u> </u>				
aress	<u> </u>				
		CITY A		STATE A	ZIP CODE A
POSITION V	,	0111 2		OIAIL A	ZII OODL Z
			Telephone	Number	
	dress POSITION Position	dress	dress CITY ▲ POSITION ▼ CITY ▲ Per Depositories: List all banks or other depositories	CITY ▲ CITY ▲ Telephone Per Depositories: List all banks or other depositories in which the communication in t	dress CITY ▲ STATE ▲ POSITION ▼ Telephone Number Per Depositories: List all banks or other depositories in which the committee deposit

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

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

			FEC	D number	C
			FEC	D number	С
			FEC	D number	C
			FEC	D number	С
y Connected C	Organization, Affi	liated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Spons
EEDOM FUN	D 				
Address	2470 DANIELLS	S BRIDGE ROAD			
	SUITE 121				
	ATHENS			GA	30606
nship:		CITY A		STATE ▲	ZIP CODE ▲
Agent: Identify	by name, addres	s (phone number – optio	nal)		
e	by name, addres	s (phone number – optio	nal)		
	by name, addres	s (phone number – optio	nal)		
e	by name, addres	s (phone number – optio	nal)		
e	by name, addres		nal)		
e		s (phone number – optio	nal)	STATE A	ZIP CODE A
	EEDOM FUN Address nship:	Address 2470 DANIELLS SUITE 121 ATHENS	Address 2470 DANIELLS BRIDGE ROAD SUITE 121 ATHENS nship: CITY	Address 2470 DANIELLS BRIDGE ROAD SUITE 121 ATHENS nship: CITY	Address 2470 DANIELLS BRIDGE ROAD SUITE 121 ATHENS GA STATE STATE

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
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
EMMER VICTORY C			
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identif	y by name, address (phone number - optional)		
Full Name	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	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ wries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY ▲ wries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or means of Bank,	CITY A cries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents

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

(h). Joint Fundrais	ng Participant:		
1.		FEC ID numbe	er C
2.		FEC ID numbe	er C
3.		FEC ID numbe	er C
4.		FEC ID number	er C
Name of Any Connecte	d Organization, Affiliated Committee, Joint F	undraising Representa	ntive, or Leadership PAC Spons
Mailing Address	332 W. LEE HIGHWAY		
	#303		
	WARRENTON	VA	20186
Relationship:	CITY ▲	STATE	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X fy by name, address (phone number – optional	Joint Fundraising Repres	entative Leadership PAC Spo
Connect Designated Agent: Ident Full Name			entative Leadership PAC Spo
Connect Designated Agent: Ident			entative Leadership PAC Spo
Connect Designated Agent: Ident Full Name			entative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	fy by name, address (phone number – optional	al)	
Connect Designated Agent: Ident Full Name	fy by name, address (phone number – optiona		
Connect Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optiona	al)	
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	fy by name, address (phone number – optional content of the conten	STATE 4	ZIP CODE A osits funds, holds accounts, rents
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or relationship to the position of Bank, Depository, etc.	fy by name, address (phone number – optional content of the conten	STATE A Telephone Number	ZIP CODE A osits funds, holds accounts, rents

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

1							
1				FEC II	O number	С	
2. 🔟				FEC II	O number	С	
3.				FEC II	O number	С	
4.				 FEC II	O number	С	
							
lame of A	Any Connected (Organization, Affili	ated Committee, Joint	Fundraising Re	presentative	e, or Leadership	PAC Spons
FRIEN	DS OF BURCH	ETT					
		95 WHITE BRIDG	GE RD				
Maili	ng Address	SUITE 207					
		NASHVILLE			TN	37205	
Date	Para de la	INASTIVILLE			TN		
Rela	tionship:	_	CITY A		STATE ▲	ZIP (CODE A
esignate			Affiliated Committee	Joint Fundraisin	g Hepresent	Leaders	ship PAC Sp
esignate Full Na	d Agent: Identify				y nepresenta	Leaders	Ship PAC Sp
Full Na	d Agent: Identify				y nepresenta	Leaders	Ship PAC Sp
Full Na	d Agent: Identify				y nepresenta	Leaders	ship PAC Sp
Full Na	d Agent: Identify				y nepresenta	Leaders	ship PAC Sp
Full Na	d Agent: Identify	by name, address		nal)	STATE A		DDE A

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

r(h). Joint		Participant:					
1					FEC ID num	ber	С
2.					FEC ID num	ber	C
3.					FEC ID num	ber	C
4.					FEC ID num	ber	C
Name of Any	Connected C)rganization A	ffiliated Committee	loint Fundrai	sing Renreser	ntative	, or Leadership PAC Sponso
	ICTORY CO						
Mailing A	ddress	4031 THICKE	T LANE				
		HARRISBURG	G 		P	'A	17110
Relations	hip:		CITY ▲		STAT	ΓE Δ	ZIP CODE ▲
	ent: Identify	by name, addre	ess (phone number –	optional)			
Full Name		by name, addre	ess (phone number –	optional)		<u> </u>	
		by name, addre	ess (phone number –	optional)			
Full Name		by name, addre	ess (phone number –	optional)			
Full Name Mailing Add	dress			optional)	STATE		ZIP CODE A
Full Name Mailing Add			ess (phone number –		STATE		ZIP CODE A

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

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
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
Mailing Address	22780 INDIAN CREEK DR.		
	SUITE 100		
Relationship:	DULLES CITY	VA VA	20166 ZIP CODE ▲
П		Fundraising Represent	
Designated Agent: Identi	fy by name, address (phone number – optional)		
Pesignated Agent: Identi	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			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name _ _ Mailing Address	CITY ▲ CITY ▲ Telepries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite the state of Bank, and Ba	CITY ▲ CITY ▲ Telepries: List all banks or other depositories in which	the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second process of the second	CITY ▲ CITY ▲ Te pries: List all banks or other depositories in which aintains funds.	the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second process of the second	CITY ▲ CITY ▲ Te pries: List all banks or other depositories in which aintains funds.	the committee deposit	s funds, holds accounts, rents

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

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
		_	
Name of Any Connected	d Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spons
ASHLEY HINSON V	ICTORY COMMITTEE		
	P.O. BOX 341027		
Mailing Address			
	ALICTINI	TV	70724
	AUSTIN		78734
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number – optiona	1)	
Designated Agent: Identi	fy by name, address (phone number – optiona	l)	
	fy by name, address (phone number – optiona	l)	
Full Name	fy by name, address (phone number – optiona	l)	
Full Name	fy by name, address (phone number – optiona	I)	
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ ories: List all banks or other depositories in w	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or many safe	CITY ▲ ories: List all banks or other depositories in w	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ Ories: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or management of Bank,	CITY ▲ CITY ▲ Ories: List all banks or other depositories in waintains funds.	STATE Telephone Number hich the committee deposit	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY ▲ CITY ▲ ories: List all banks or other depositories in what intains funds.	STATE Telephone Number hich the committee deposi	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY ▲ CITY ▲ ories: List all banks or other depositories in what in a funds.	STATE Telephone Number hich the committee deposi	ts funds, holds accounts, rents

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

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 Fundra	ising Representative	e, or Leadership PAC Sponsor
	THE VALADAO VICT	ORY FUND		
	Mailing Address	5132 N PALM AVE		
		NUM 227		
		FRESNO	CA	93704
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Full Name			
	Mailing Address	CITY A	STATE A	ZIP CODE A
		•	STATE A	ZIP CODE A
9.	Mailing Address TITLE OR POSITION	Telections: List all banks or other depositories in which the intains funds.	ephone Number	s funds, holds accounts, rents

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	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected LONG TEAM	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
Mailing Address	P.O. BOX 3864		
	SPRINGFIELD	MO	65808
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
		oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		pint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		pint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated 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 while aintains funds.	STATE A Telephone Number	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 pries: List all banks or other depositories in while aintains funds.	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.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in while aintains funds.	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.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number	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	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
	of Any Connected O	rganization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Sponsor
N	Mailing Address	824 S. MILLEDGE AVENUE		
		SUITE 101		
		ATHENS	GA	30605
F	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected C	Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponsor
8. Design	ated Agent: Identify b	oy name, address (phone number - optional)		
Ful	I Name			
Ма	iling Address	<u> </u>		
Tľ	TLE OR POSITION ▼	CITY A	STATE ▲	ZIP CODE ▲
		ı	lephone Number	
safety of Name of Deposit	or Other Depositoried deposit boxes or main of Bank, tory, etc. Mailing Address		the committee deposit	1
safety (Name (Deposi	deposit boxes or main of Bank, tory, etc.	tains funds.		1

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	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
MAJORITY RISING			
Mailing Address	P.O. BOX 30844		
Belotiveti	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identif	by by name, address (phone number – optional)	STATE A	ative Leadership PAC Spo
Pesignated Agent: Identing Full Name Mailing Address	by by name, address (phone number – optional) CITY		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	city by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank,	city by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Tries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents

Optional Supplemental Information FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8 and/or 9

Page	of	232
1 ago	01	

5(g)	or(h). Joint Fundraisin	g Participant:			
	1.		FEC ID	number	C
	2.		FEC ID	number	С
	3.		FEC ID	number	С
	4		FEC ID	number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Rep	resentative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 97275			
		RALEIGH		NC NC	27624
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X J	oint Fundraising	Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)			
	Full Name				
	Mailing Address				
		1	, , , , ,	1 . 1	
	TITLE OR POSITION	CITY A		STATE A	ZIP CODE ▲
			Telephone Nu	ımber	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in whi intains funds.	ch the committ	tee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.				
	Mailing Address				
		CITY ▲	8	STATE A	ZIP CODE ▲

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

h). Joint Fundraisi	ig i aiticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
-	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
HUDSON VICTORY	FUND		
Mailing Address	824 S. MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	Affiliated Committee X Join by particular of the Affiliated Committee X Join by by name, address (phone number – optional)	nt Fundraising Representa	
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi	by by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address	by by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	city by name, address (phone number – optional) CITY CITY pries: 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 mame of Bank, epository, etc.	city by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	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.	city by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains 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	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fundr	aising Representativ	re, or Leadership PAC Spons
TEAM BUDDY			
Mailing Address	824 S. MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		Fundraising Represent	tative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Represent	tative Leadership PAC Spo
Connecte Pesignated Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	tative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint fly by name, address (phone number – optional) CITY		
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee	STATE A elephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Denoit afety deposit boxes or make the property of Bank, Depository, etc.	Affiliated Committee Affiliated Committee Figure 1. Joint Market School State School School State School School State School School State School School State School School State School State School State School State School School State School State School State School State School State	STATE A elephone Number	ZIP CODE ZIP CODE ts funds, holds accounts, rents

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
Name of Any Composted	Overanization Affiliated Committee Islant F	undusising Danussantstin	o an Landaushin DAC Cuana
NORTH TO THE FU	Organization, Affiliated Committee, Joint Four Four Four Four Four Four Four Four	undraising nepresentativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 2814		
	SEWARD	AK	99664
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte Designated Agent: Identif	y by name, address (phone number – optiona	Joint Fundraising Represent	
Designated Agent: Identif			
Designated Agent: Identif			
Designated Agent: Identif			
Designated Agent: Identif	y by name, address (phone number – optiona	l)	7IP CODE A
Designated Agent: Identif	y by name, address (phone number – optiona	STATE A	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optiona	l)	ZIP CODE A
Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional content of the content	STATE A Telephone Number	ts funds, holds accounts, rents
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or means of Bank,	y by name, address (phone number – optional content of the content	STATE A Telephone Number	ts funds, holds accounts, rents
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	y by name, address (phone number – optional control of the control	STATE A Telephone Number	ts funds, holds accounts, rents

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

(h). Joint Fundrais	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	d Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e or Leadershin PAC Snons
KUSTOFF VICTOR	-		
Mailing Address	1661 AARON BRENNER DR		
	SUITE 300		
	MEMPHIS	TN	38120
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect		oint Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connect Connect Designated Agent: Ident	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X Jo		
Connect Designated Agent: Ident Full Name	Affiliated Committee X Jo	oint Fundraising Represent	Leadership PAC Spo
Connect Designated Agent: Ident Full Name Mailing Address	Affiliated Committee X Jo		
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Journal of the position of the property	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be boxes or not be boxes. Depository, etc.	Affiliated Committee X Journal of the position of the property	STATE A Telephone Number	ZIP CODE A

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

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

or(h). Joint Fundrais i	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	d Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
MALLIOTAKIS VICT			
Mailing Address	PO BOX 68		
	SOUTH SALEM	NY	10590
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Sponse
Connecto		Fundraising Represent	ative Leadership PAC Sponse
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Joint I	Fundraising Represent	ative Leadership PAC Sponse
Designated Agent: Identi	ed Organization Affiliated Committee X Joint I	Fundraising Represent	ative Leadership PAC Sponse
Designated Agent: Identi	ed Organization Affiliated Committee X Joint I	Fundraising Represent	ative Leadership PAC Sponse
Designated Agent: Identify Full Name Mailing Address	and Organization Affiliated Committee X Joint I	Fundraising Represent	Leadership PAC Sponso
Designated Agent: Identi	ed Organization		
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Joint I	STATE A ephone 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	С
4		FEC ID	number	C
-	l Organization, Affiliated Committee, Join	Fundraising Repr	esentative	e, or Leadership PAC Spons
WIN THE FUTURE	FUND 			
Mailing Address	PO BOX 2485			
	SPRINGFIELD	, , , , , ,	VA	22152
Relationship:	CITY A		STATE A	ZIP CODE ▲
Connecte		X Joint Fundraising	Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee	X Joint Fundraising	Representa	Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee	X Joint Fundraising	Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee	X Joint Fundraising	Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee fy by name, address (phone number – option	X Joint Fundraising onal)		
Connecte Designated Agent: Identi Full Name	Affiliated Committee fy by name, address (phone number – option	X Joint Fundraising onal)	Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee fy by name, address (phone number – option	X Joint Fundraising onal)	TATE A	
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee fy by name, address (phone number – option CITY CITY ories: List all banks or other depositories in the initial stands.	Joint Fundraising onal) STelephone Nur	TATE Amber	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Depositional afety deposit boxes or make the proposition of Bank, Depository, etc.	Affiliated Committee fy by name, address (phone number – option CITY CITY ories: List all banks or other depositories in the initial stands.	Joint Fundraising onal) S Telephone Nur which the committee	TATE Amber	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	C
-	Organization, Affiliated Committee, Joint Fo	ndraising Representativ	re, or Leadership PAC Spons
WESLEY HUNT VIC			
Mailing Address	PO BOX 341027		
	AUSTIN		78734
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	tative Leadership PAC Spo
Connecte	od Organization Affiliated Committee X		tative Leadership PAC Spo
Connecte Designated Agent: Identi	od Organization Affiliated Committee X		tative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	od Organization Affiliated Committee X		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	od Organization Affiliated Committee X		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X		
Connected Agent: Identification of the Connected Agent: I	Affiliated Committee X fy by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents
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 X fy by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number ich the committee deposi	ZIP CODE A ts funds, holds accounts, rents
Connected Pesignated Agent: Identification of Bank, Depository, etc.	Affiliated Committee X fy by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number ich the committee deposi	ZIP CODE A ts funds, holds accounts, rents

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	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponso
Mailing Address	824 S MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joi y by name, address (phone number – optional)	int Fundraising Represent	
Designated Agent: Identi	y by name, address (phone number – optional)	STATE A	Leadership PAC Spo
Designated Agent: Identing Full Name Mailing Address	y by name, address (phone number – optional) CITY		
Designated 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 aintains funds.	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 aintains funds.	STATE A Telephone Number	ZIP CODE A

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

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	C
	4.		FEC ID number	C
	-	rganization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
L	HIGGINS VICTORY CO)MMITTEE		
L				
	Mailing Address	228 S WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	, , , VA ,	22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected C	Organization Affiliated Committee X Joint F	Fundraising Representa	ative Leadership PAC Sponsor
8. De		oy name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION V	CITY A	STATE ▲	ZIP CODE ▲
			ephone Number	
saf	ety deposit boxes or main	es: List all banks or other depositories in which the tains funds.	ne committee deposit	s funds, holds accounts, rents
	me of Bank, pository, etc.			
	Mailing Address	1		
	· ·			
	·			
	•	CITY A	STATE A	ZIP CODE A

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

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	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponso
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
Relationship:	ATHENS CITY A	GA STATE A	30605 ZIP CODE ▲
	311 -	01/112 =	2 0052 2
Designated Agent: Identi	Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Spo
			ative Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional)		
Designated Agent: Identi Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in what a intains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in what a intains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 9

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

	ng Participant:			
1.		FEC ID n	umber	
2.		FEC ID n	umber	
3.		FEC ID n	umber	
4.		FEC ID n	umber	
-	d Organization, Affiliated Committee, Joint	Fundraising Repre	sentative,	or Leadership PAC Spons
HISPANIC LEADER	SHIP TRUST PARTNERSHIP			
Mailing Address	PO BOX 341027			
	AUSTIN	1	TX	78734
Relationship:	CITY A	S	TATE A	ZIP CODE ▲
Full Name	ify by name, address (phone number – optio	_	1 1 1 1	
Mailing Address				
Mailing Address				
Mailing Address				
Mailing Address TITLE OR POSITION	CITY A	ST	ATE A	ZIP CODE A
TITLE OR POSITION	CITY A	ST/		ZIP CODE A
TITLE OR POSITION		Telephone Num	ber	
TITLE OR POSITION	ories: List all banks or other depositories in	Telephone Num	ber	
TITLE OR POSITION	ories: List all banks or other depositories in naintains funds.	Telephone Num	ber	funds, holds accounts, rents
TITLE OR POSITION Banks or Other Deposit safety deposit boxes or management of Bank,	ories: List all banks or other depositories in naintains funds.	Telephone Num	ber	funds, holds accounts, rents
TITLE OR POSITION Banks or Other Deposit safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in naintains funds.	Telephone Num	ber	funds, holds accounts, rents
TITLE OR POSITION Banks or Other Deposit safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in naintains funds.	Telephone Num	ber	funds, holds accounts, rents

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

FEC Form 1S (Revised 02/2017)

1 2						
2. 🖳				FEC	ID number	C
				FEC	ID number	С
3. 💷				FEC	ID number	С
4.				FEC	ID number	С
Name of A	Any Connected	Organization, Af	filiated Committee, Joint	Fundraising R	epresentativ	ve, or Leadership PAC Spons
JOHN	JAMES FOR M	IICHIGAN				
Maili	ng Address	P.O. BOX 628				
		ST. CLAIR SH	ORES		MI	48080
Rela	tionship:		CITY ▲		STATE A	ZIP CODE ▲
Designate		Organization by name, addre	Affiliated Committee	X Joint Fundraisi	ng Represent	tative Leadership PAC Spo
Full Na	d Agent: Identify				ng Represent	tative Leadership PAC Spo
Full Na	d Agent: Identify				ng Represent	tative Leadership PAC Spo
Full Na	d Agent: Identify				ng Represent	tative Leadership PAC Spo
Full Na	d Agent: Identify ame	by name, addre	ss (phone number – optio			
Full Na	d Agent: Identify	by name, addre			STATE A	Leadership PAC Spo

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

(h). Joint Fu	ındraising Participan				
1			FEC ID	number	С
2.			FEC ID	number	С
3			FEC ID	number	С
4.			FEC ID	number	С
Name of Any Co	nnected Organization	n, Affiliated Committee, Joint	Fundraising Repr	esentative	e, or Leadership PAC Spons
DUARTE VIC	TORY FUND				
Mailing Add	ress 9460 TEG	SNER ROAD			
	HILMAR			CA	95324
Relationship	:	CITY A		STATE A	ZIP CODE ▲
Designated Agen	t: Identify by name, a	ddress (phone number – optior	nal)		
Full Name		ddress (phone number – optior	nal)		
		ddress (phone number – optior	nal)		
Full Name		ddress (phone number – optior	nal)		
Full Name					
Full Name	ss L	ddress (phone number – option		TATE A	ZIP CODE A
Full Name	ss L				ZIP CODE A
Full Name Mailing Address TITLE OR Po	ss L	CITY A banks or other depositories in sign	S Telephone Nu	mber	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR Policy Banks or Other Istafety deposit box Name of Bank,	Depositories: List all tes or maintains funds	CITY A banks or other depositories in sign	S Telephone Nu	mber	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR Policy Banks or Other It safety deposit box Name of Bank, Depository, etc.	Depositories: List all tes or maintains funds	CITY A banks or other depositories in sign	S Telephone Nu	mber	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR Policy Banks or Other It safety deposit box Name of Bank, Depository, etc.	Depositories: List all tes or maintains funds	CITY A banks or other depositories in sign	Telephone Nu	mber	s funds, holds accounts, rent

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

ected Organization, Affiliate Pund Section Sec	GTON ST.	FEC ID nu	umber C umber C	eadership PAC Spons
RY FUND 228 S. WASHING S STE. 115	GTON ST.	FEC ID nu	umber C	eadership PAC Spons
RY FUND 228 S. WASHING S STE. 115	GTON ST.	FEC ID nu	umber C	eadership PAC Spons
RY FUND 228 S. WASHING S STE. 115	GTON ST.			eadership PAC Spons
RY FUND 228 S. WASHING S STE. 115	GTON ST.	Fundraising Repres	sentative, or L	eadership PAC Spons
RY FUND 228 S. WASHING S STE. 115	GTON ST.	Fundraising Repres	entative, or L	eadership PAC Spons
s 228 S. WASHING STE. 115				
STE. 115				
STE. 115				
STE. 115				
ALEXANDRIA				
			VA 1 1 2	22314
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		Telephone Numb	oer]-[
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Optional Supplemental Information

Page	of	232

for Lines 5(g) or (h), 6, 8 and/or 9 FEC Form 1S (Revised 02/2017) 5(g) or (h). Joint Fundraising Participant: C FEC ID number C FEC ID number C FEC ID number C FEC ID number Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6. BARRETT BRIGADE VICTORY FUND PO BOX 15221 Mailing Address **LANSING** 48901 Relationship: ZIP CODE A CITY A STATE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number - optional) 8. Full Name Mailing Address ZIP CODE A CITY A STATE A TITLE OR POSITION ▼ Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address

CITY A

STATE A

ZIP CODE A

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

(h). Joint Fundraisi	ng raiticipant.		
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 Fo	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	50 S JONES BLVD STE 201		
0			
	LAS VEGAS	NV L	89107
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X	loint Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optiona		Leadership PAC Spo
Designated 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 CITY CITY pries: List all banks or other depositories in what a intains funds.	STATE A Telephone Number	ZIP CODE ZIP CODE ts funds, holds accounts, rent
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in what a intains funds.	STATE A Telephone Number ich the committee deposi	ZIP CODE A ts funds, holds accounts, rents

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

	Participant:				
1.			FEC ID nu	ımber	C
2			FEC ID nu	ımber	C
3.			FEC ID nu	ımber	C
4.			FEC ID nu	ımber	C
Name of Any Connected O	rganization, Affiliatec	l Committee, Joint Fι	ndraising Repres	entative,	or Leadership PAC Sponsor
CAO VICTORY FUND					
Mailing Address	PO BOX 30844				
	BETHESDA			MD	20824
Relationship:		CITY A	S	TATE A	ZIP CODE ▲
Connected	Organization Affilia	ated Committee X	loint Fundraising Re	presentati	ve Leadership PAC Spons
Full Name					
Mailing Address					
TITLE OR POSITION \	7	CITY A	STA	TE 🛦	ZIP CODE ▲
			0	-	
	_		Telephone Numb		

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

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

Page of ²³²

(h). Joint Fundraisi	ig Faiticipant.			
1.			FEC ID number	С
2.			FEC ID number	С
3			FEC ID number	C
4			FEC ID number	С
Name of Any Connected	Organization, Affiliated Co	ommittee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE.			
	STE 101			
Relationship:	ATHENS	iTY 🛦	GA STATE ▲	30605 ZIP CODE ▲
riolationip.	-		STATE	ZII OODL A
Designated Agent: Identi	Affiliated		Fundraising Represent	ative Leadership PAC Spo
			Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi			Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi			Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone		Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone	number – optional)	STATE A lephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone CIT CIT Pries: List all banks or other	number – optional) TY Te depositories in which	STATE A lephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name	fy by name, address (phone CIT CIT Pries: List all banks or other	number – optional) TY Te depositories in which	STATE A Ilephone Number the committee deposit	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	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
KIRKWETEK VICTO			
Mailing Address	824 S MILLEDGE AVENUE		
Relationship:	ATHENS CITY A	GA STATE A	30605 ZIP CODE ▲
п		nt Fundraising Representa	
Designated Agent: Identif	y by name, address (phone number - optional)		
Designated 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	by by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	elephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of Bank,	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of Bank, Depository, etc.	CITY A CITY A pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of Bank, Depository, etc.	CITY A CITY A pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents

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	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraining Poprocentativ	o or Londorphin DAC Spons
KISTNER VICTORY	-	ilulaisilig nepresellativ	e, or Leadership FAC Spons
Mailing Address	PO BOX 183		
	HUDSON	wi	54016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	y by name, address (phone number - optional)		
Designated Agent: Identi	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	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name _ _ Mailing Address	CITY		ZIP CODE A
Full Name Mailing Address	CITY A pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	es funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A pries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	es funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of Bank,	CITY A pries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	es funds, holds accounts, rents

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	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
RUDY VICTORY FU	ND		
Mailing Address	PO BOX 26141		
	ALEXANDRIA	VA VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Jofy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
		oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Sp
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 CITY pries: List all banks or other depositories in which aintains funds.	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,	fy by name, address (phone number – optional) CITY CITY pries: 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 afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: 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 afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Optional Supplem for Lines 5(g) or (

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or	Lines	5(g)	or (h),	6,	8	and/or 9	

	ng Participant:		
1.		FEC ID num	ber C
2.		FEC ID num	ber C
3.		FEC ID num	ber C
4.		 FEC ID num	ber C
Name of Amy Connecto	A Committee Affiliated Committee Laint	Fundaciona Donaco	stating out and explain BAC Comm
JEREMY SHAFFER	I Organization, Affiliated Committee, Joint VICTORY FUND	rundraising nepreser	Lative, or Leadership PAC Spon
Mailing Address	PO BOX 391		
	GIBSONIA	P	A 15044
Relationship:	CITY A	STAT	TE ▲ ZIP CODE ▲
	Affiliated Committee > Affiliated Name, address (phone number – option	Joint Fundraising Repr	esentative Leadership PAC Sp
Designated Agent: Ident			esentative Leadership PAC Sp
Designated Agent: Ident			Leadership PAC Sp
Designated Agent: Ident			Leadership PAC Sp
Designated Agent: Ident	fy by name, address (phone number – option	nal)	
Designated Agent: Ident	fy by name, address (phone number – option		
Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – option	nal)	ZIP CODE A
Designated Agent: Ident Full Name	fy by name, address (phone number – option of the control of the c	STATE Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposites afety deposit boxes or not be and the composite of Bank, Depository, etc.	fy by name, address (phone number – option of the control of the c	STATE Telephone Number which the committee de	ZIP CODE A

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

1	Participant:				
1.			FEC II	O number	С
2.			FEC II	O number	С
3.			FEC II	O number	C
4.			FEC II	O number	C
Name of Any Connected (,TEAM MAYRA	Organization, Affili	iated Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Sponsor
TEAW WATKA					
Mailing Address	1005 CONGRES	S AVENUE			
-	SUITE 400				
	AUSTIN			, TX	78701
Relationship:		CITY A		STATE A	ZIP CODE ▲
	Organization	_	Joint Fundraisin		
Full Name					
Mailing Address					
			I	1	I , , , , I-I , , ,
TITLE OR POSITION	V	CITY A		STATE A	ZIP CODE ▲
	•				
			Telephone N	lumber	- -

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

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
	1 Organization, Affiliated Committee, Joint F	undraising Representativ	ve, or Leadership PAC Spons
TEAM MONICA VIC	TORY		
Mailing Address	228 S WASHINGTON STREET		
-	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Joint Fundraising Represen	tative Leadership PAC Spo
Designated Agent: Identi	ed Organization Affiliated Committee X fy by name, address (phone number – options		tative Leadership PAC Spo
Designated Agent: Identi			tative Leadership PAC Spo
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Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – options	al)	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – options	STATE A	
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Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – options CITY CITY ories: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE ZIP CODE its funds, holds accounts, rents
Pesignated Agent: Identification Full Name	fy by name, address (phone number – options CITY CITY ories: List all banks or other depositories in waintains funds.	STATE Telephone Number which the committee depos	ZIP CODE ZIP CODE its funds, holds accounts, rents
Pesignated Agent: Identic Full Name	fy by name, address (phone number – options CITY CITY ories: List all banks or other depositories in water a containtains funds.	STATE A Telephone Number	ZIP CODE ZIP CODE its funds, holds accounts, rents
Pesignated Agent: Identification Full Name	fy by name, address (phone number – options CITY CITY ories: List all banks or other depositories in water address (phone number – options) ories: List all banks or other depositories in water address (phone number – options)	STATE A Telephone Number	ZIP CODE ZIP CODE its funds, holds accounts, rents

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	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	re, or Leadership PAC Spons
ZINKE VICTORY FU	IND		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte		loint Fundraising Represent	tative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee X		tative Leadership PAC Spo
Connecte Designated Agent: Identi	d Organization Affiliated Committee X		tative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee X		tative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X		
Connecte Designated Agent: Identi Full Name	Affiliated Committee X		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X		
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Ty by name, address (phone number – optional option	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents
Connected Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	Affiliated Committee X Ty by name, address (phone number – optional option	STATE A Telephone Number ich the committee deposi	ZIP CODE A ts funds, holds accounts, rents

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

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2				FEC	D number	С
3				FEC	D number	С
4				FEC	D number	C
	Any Connected		ffiliated Committee, Joint	Fundraising Re	epresentativ	re, or Leadership PAC Spons
Mailir	ng Address	PO BOX 9727	5			
		RALEIGH			NC	27624
	Contract of		CITY A		STATE ▲	ZIP CODE ▲
_	Connected d Agent: Identify	Organization by name, addre	Affiliated Committee	S Joint Fundraisin	ng Represent	tative Leadership PAC Spi
Designated Full Na	Connected d Agent: Identify				ng Represent	tative Leadership PAC Sp
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Designated Full Na Mailing	Connected d Agent: Identify	by name, addre			STATE A	Leadership PAC Spr

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

h). Joint Fundraisi	ig 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 Fur	ndraising Representativ	e, or Leadership PAC Spon
PATTI VICTORY FU	ND 		
Mailing Address	9460 TEGNER ROAD		
	HILMAR	CA	95324
Relationship:	CITY A	STATE A	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	cories: List all banks or other depositories in white aintains funds.	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.	cories: List all banks or other depositories in white aintains funds.	STATE A Telephone Number	ZIP CODE A

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

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		FEC ID r	umber (
		 FEC ID r	umber (
nnected Organization	, Affiliated Committee, Joint	Fundraising Repre	sentative,	or Leadership PAC Spon
VICTORY FUND				
DO DOY	0742			
ress P.O. BOX				
BRANDON	<u> </u> 		FL	33509
:	CITY A	5	STATE A	ZIP CODE ▲
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ss <u> </u>				
ss			<u> </u>	
	CITY A	ST		ZIP CODE A
os Liliania de la composición del composición de la composición d	CITY A	ST. Telephone Num		ZIP CODE A
:	P.O. BOX 2 BRANDON BRANDON Connected Organization	P.O. BOX 2743 BRANDON CITY Connected Organization Affiliated Committee	P.O. BOX 2743 BRANDON CITY S	P.O. BOX 2743 BRANDON CITY ▲ STATE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representation

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

1 2						
2. 🔟				FEC	ID number	C
				FEC	ID number	С
3				FEC	ID number	C
4. 🔟				FEC	ID number	C
	Any Connected	_	liated Committee, Joint	Fundraising R	epresentativ	re, or Leadership PAC Spons
Maili	ing Address	P.O. BOX 5042				
		VIRGINIA BEAC	CH		_ ∨A 	23471
Rela	tionship:		CITY A		STATE ▲	ZIP CODE ▲
		Organization by name, address	Affiliated Committee	Joint Fundraisi	ng Represent	tative Leadership PAC Sp
Designated Full Na	d Agent: Identify				ng Represent	tative Leadership PAC Sp
Designated Full Na	d Agent: Identify				ng Represent	tative Leadership PAC Sp
Designated Full Na	d Agent: Identify				ng Represent	tative Leadership PAC Sp
Designated Full Na Mailing	d Agent: Identify ame	by name, address	s (phone number – optio			
Designated Full Na Mailing	d Agent: Identify	by name, address			STATE A	Leadership PAC Sp

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

r(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
-	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Sponso
Mailing Address	901 N WASHINGTON ST		
	SUITE 700		
Relationship:	ALEXANDRIA	VA VA	22314
neialionship.	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X July by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	y by name, address (phone number – optional)		ZIP CODE A
Designated Agent: Identi	y by name, address (phone number – optional)		
Designated Agent: Identi Full Name	CITY A pries: List all banks or other depositories in while aintains funds.	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.	CITY A pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number ch the committee deposit	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
-	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
AMERICAN VICTOR	RY FUND		
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
		STATE ▲	ZIP CODE ▲
	CITY ▲ ed Organization	t Fundraising Representa	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Join		ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Join fy by name, address (phone number – optional)		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional)	t Fundraising Representa	
Connected Agent: Identification of the Connected Agent: I	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which paintains funds.	STATE A	ZIP CODE A
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Period of Banks or Other Deposite afety deposit boxes or make the proposition of Bank, Depository, etc.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which paintains funds.	STATE A celephone Number	ZIP CODE A

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

Page ___ **of** ____

FEC Form 1S (Revised 02/2017)

5(g) o	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 Fundra	aising Representative	e, or Leadership PAC Sponsor
	JENNIFER-RUTH GR	REEN VICTORY FUND		
	Mailing Address	PO BOX 44211		
	-			
		INDIANAPOLIS	, IN	46244
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponsor
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	
9.	Full Name Mailing Address TITLE OR POSITION	CITY CITY Te	lephone Number	ZIP CODE 🛦
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail name of Bank, Depository, etc.	CITY CITY Te	lephone Number	ZIP CODE 🛦
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail name of Bank, Depository, etc.	CITY CITY Te	lephone Number	ZIP CODE 🛦

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

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

Mailing Address Relationship: Connected Org	28 S WASHINGTON ST TE 115 LEXANDRIA CITY A	FEC ID number FEC ID number FEC ID number FEC ID number draising Representati VA STATE 4 ht Fundraising Represer	ive, or Leadership PAC Spons 22314 ZIP CODE
3. 4. 4. Name of Any Connected Organ BOGNET VICTORY COMMISSION Mailing Address Relationship: Connected Organ	MITTEE 28 S WASHINGTON ST TE 115 LEXANDRIA CITY anization Affiliated Committee X Join	FEC ID number FEC ID number draising Representati	ive, or Leadership PAC Spons 22314 ZIP CODE
Name of Any Connected Organ BOGNET VICTORY COMMAND Address Mailing Address Relationship: Connected Organ Co	MITTEE 28 S WASHINGTON ST TE 115 LEXANDRIA CITY anization Affiliated Committee X Join	FEC ID number	ive, or Leadership PAC Spons 22314 ZIP CODE
Name of Any Connected Organ BOGNET VICTORY COM Mailing Address Relationship: Connected Organ Connected Orga	MITTEE 28 S WASHINGTON ST TE 115 LEXANDRIA CITY anization Affiliated Committee X Join	draising Representati	ive, or Leadership PAC Spons 22314 ZIP CODE
BOGNET VICTORY COM Mailing Address A Relationship: Connected Org Designated Agent: Identify by I	MITTEE 28 S WASHINGTON ST TE 115 LEXANDRIA CITY anization Affiliated Committee X Join	VA STATE 4	22314 ZIP CODE A
Mailing Address A Relationship: Connected Org Designated Agent: Identify by the second of the seco	28 S WASHINGTON ST TE 115 LEXANDRIA CITY anization Affiliated Committee X Join	STATE 4	ZIP CODE A
Relationship: Connected Org Designated Agent: Identify by I	TE 115 LEXANDRIA CITY anization Affiliated Committee X Join	STATE 4	ZIP CODE A
Relationship: Connected Org Designated Agent: Identify by I	TE 115 LEXANDRIA CITY anization Affiliated Committee X Join	STATE 4	ZIP CODE A
Relationship: Connected Org Designated Agent: Identify by I	CITY Affiliated Committee Join	STATE 4	ZIP CODE A
Relationship: Connected Org Designated Agent: Identify by I	CITY ▲ Anization Affiliated Committee X Join	STATE 4	ZIP CODE A
Connected Org Designated Agent: Identify by I	Affiliated Committee X Join		
Designated Agent: Identify by I		nt Fundraising Represer	ntative Leadership PAC Spo
Mailing Address			
_			
TITLE OR POSITION ▼	CITY A	STATE ▲	ZIP CODE ▲
1	-	Telephone Number	
safety deposit boxes or maintain Name of Bank, Depository, etc.		n the committee depos	
Mailing Address			
L			
L		1 1 1	

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

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

	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Ann Commonted	Ourseinstine Affiliated Opening Laint F	on ducinia a Domina antati	and and another BAC Course
PROTECT THE HOU	Organization, Affiliated Committee, Joint F JSE 2024	undraising Representati	ve, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
Connecte Designated Agent: Identif	d Organization Affiliated Committee X y by name, address (phone number – optiona	Joint Fundraising Represer	
Designated Agent: Identif			tative Leadership PAC Spo
Designated Agent: Identif			
Designated Agent: Identif			
Designated Agent: Identif	y by name, address (phone number – optiona		
Designated Agent: Identif	y by name, address (phone number – optiona		ZIP CODE A
Pesignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optiona		
Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional control of the control	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Cafety deposit boxes or management of Bank,	y by name, address (phone number – optional control of the control	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	y by name, address (phone number – optional control of the control	STATE A Telephone Number	ZIP CODE A

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

Page	of	232

FEC Form 1S (Revised 02/2017)

5(g) or (h).	Joint Fundraising	Participant:		
1	1		FEC ID number	C
2	2.		FEC ID number	C
3	3.		FEC ID number	С
4	4.		FEC ID number	C
6. Nam	ne of Any Connected C	rganization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
S	SOUTH JERSEY FIRS	:T 		
L				
		C/O RED CURVE SOLUTIONS		
	Mailing Address			
		138 CONANT STREET 2ND FLOOR		
		BEVERLY	MA	01915
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ignated Agent: Identify	by name, address (phone number – optional)		
ı		by name, address (phone number – optional)		
ı	Full Name	by name, address (phone number – optional)		
ı	Full Name	by name, address (phone number – optional)		
ı	Full Name	CITY A	STATE A	ZIP CODE A
ı	Full Name	CITY A	STATE A	ZIP CODE A
ı	Full Name	CITY A	STATE A	ZIP CODE A
9. Ban i safet	Full Name	CITY CITY Tele es: List all banks or other depositories in which the	ephone Number	
9. Ban i safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositoric ty deposit boxes or mair ne of Bank, ository, etc.	CITY CITY Tele es: List all banks or other depositories in which the	ephone Number	
9. Ban i safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositoric ty deposit boxes or mair ne of Bank, ository, etc.	CITY CITY Tele es: List all banks or other depositories in which the	ephone Number	

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

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
Name of Any Connected C	Organization, Affiliated Committee, Joint I	Fundraising Representativ	re, or Leadership PAC Sponsor
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		Joint Fundraising Represent	tative Leadership PAC Spor
Full Name	by name, address (phone number – option	ai) 	
Mailing Address			
			1
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
	•	Telephone Number	
Banks or Other Depositorisafety deposit boxes or main Name of Bank, Depository, etc. Mailing Address	es: List all banks or other depositories in vintains funds.	which the committee deposit	ts funds, holds accounts, rents
	CITY A	STATE ▲	ZIP CODE ▲

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	C
4		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representativ	e, or Leadership PAC Spons
ARRIVELE VICTORY			
Mailing Address	PO BOX 1488		
Relationship:	CRANBERRY TOWNSHIP CITY	PA PA STATE A	16066 ZIP CODE ▲
Connected	d Organization Affiliated Committee X Joint by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Spo
Connected		t Fundraising Represent	Leadership PAC Spo
Connected Pesignated Agent: Identify		t Fundraising Represent	Leadership PAC Spo
Connected Designated Agent: Identify Full Name		t Fundraising Represent	Leadership PAC Spo
Connected Designated Agent: Identify Full Name		t Fundraising Represent	Leadership PAC Spo
Connected Designated Agent: Identify Full Name	by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which sintains funds.	STATE A	ZIP CODE A
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or mailane of Bank, Depository, etc.	ries: List all banks or other depositories in which sintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or mail	ries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or mailane of Bank, Depository, etc.	ries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A

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

ng Participant:				
		FEC II	0 number	С
		FEC II	0 number	С
		FEC II	0 number	C
		FEC II) number	С
Organization, Affiliate	d Committee, Joint	Fundraising Re	oresentative	e, or Leadership PAC Spons
ND				
332 W LEE HWY				
#303				
WARRENTON			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	20186
	CITY A		STATE ▲	ZIP CODE ▲
1				
	CITY A		STATE A	ZIP CODE A
■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■	CITY A	Telephone N		ZIP CODE A
	other depositories in v	Telephone N	umber	
ories: List all banks or	other depositories in v	Telephone N	umber	s funds, holds accounts, rents
	332 W LEE HWY #303 WARRENTON d Organization Affi	332 W LEE HWY #303 WARRENTON CITY ▲ d Organization Affiliated Committee	FEC II FEC II	332 W LEE HWY #303 WARRENTON CITY ▲ STATE ▲ d Organization Affiliated Committee X Joint Fundraising Representation

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

(h). Joint Fundraisir	•		
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 Fu	indraising Representativ	e, or Leadership PAC Spons
SMITH VICTORY			
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee X by hame, address (phone number – optional	Joint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif			ative Leadership PAC Spo
Designated Agent: Identif			ative Leadership PAC Spo
Designated Agent: Identif			ative Leadership PAC Spo
Designated Agent: Identification Full Name Mailing Address	by name, address (phone number – optional		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional	STATE A	Leadership PAC Spo
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional		
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or mails and mailing and mail	ries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or make the period of Bank, Depository, etc.	ries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A

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

(h). Joint F i		Participant:					
1.				FEC	ID number	С	
2				FEC	ID number	С	
3.				FEC	ID number	С	
4.				FEC	ID number	С	
lame of Any Co	nnected O	ganization, Af	ffiliated Committee, Joint	Fundraising R	epresentativ	e, or Leaders	ship PAC Spons
WALBERG V	ICTORY F	TUND					
		PO BOX 1362					
Mailing Add	ress						
		JACKSON			MI	49204	
							710 0005
	Connected C		CITY A Affiliated Committee ss (phone number – optic	≺ Joint Fundraisi	STATE ▲ ng Represent		ZIP CODE A
	Connected C		Affiliated Committee				
Designated Agen	Connected C		Affiliated Committee				
Designated Agen	Connected C		Affiliated Committee				
Pesignated Agen	Connected C		Affiliated Committee				
Pesignated Agen Full Name Mailing Addre	connected Control of the control of	y name, addres	Affiliated Committee			ative Le	
Designated Agen	connected Control of the control of	y name, addres	Affiliated Committee :		ng Represent	ative Le	eadership PAC Sp

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	C
4.			FEC ID number	C
	of Any Connected O	rganization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
1	Mailing Address	824 S. MILLEDGE AVENUE		
		SUITE 101		
		ATHENS	GA	30605
ı	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected (Organization Affiliated Committee X Joint F	Fundraising Represent	ative Leadership PAC Sponsor
	nated Agent: Identify b	oy name, address (phone number – optional)		
Fu		oy name, address (phone number – optional)		
Fu	ill Name	oy name, address (phone number – optional)		
Fu	ill Name	oy name, address (phone number – optional)		
Fu Ma	ill Name	CITY	STATE A	ZIP CODE A
Fu Ma	ailing Address	CITY A	STATE A	ZIP CODE A
Fu Ma T Banks safety Name Deposi	ailing Address	CITY Tele es: List all banks or other depositories in which the tains funds.	ephone Number	s funds, holds accounts, rents
Fu Ma T Banks safety Name Deposi	ailing Address TITLE OR POSITION s or Other Depositoric deposit boxes or main of Bank, sitory, etc.	CITY Tele es: List all banks or other depositories in which the tains funds.	ephone Number	s funds, holds accounts, rents

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
Name of Any Connecte KATKO VICTORY F	d Organization, Affiliated Committee, Joint Fu UND	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect Designated Agent: Ident	ed Organization Affiliated Committee X J		
Designated Agent: Ident	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		ZIP CODE A
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in whi	STATE A Telephone Number	
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in whi	STATE A Telephone Number	
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in white naintains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in white naintains funds.	STATE Telephone Number tch the committee deposit	s funds, holds accounts, rents
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in white naintains funds.	STATE Telephone Number tch the committee deposit	s funds, holds accounts, rents
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in white naintains funds.	STATE Telephone Number tch the committee deposit	s funds, holds accounts, rents

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

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

(h). Joint	_	Participant:								
1.						FEC ID nu	mber	С		
2						FEC ID nu	mber	С		
3.						FEC ID nu	mber	С		
4.					_	FEC ID nu	mber	С		
Name of Any	Connected (Organization,	Affiliated Cor	nmittee, Join	t Fundrais	ing Repres	entativ	e, or Le	adership	PAC Spon
ZELDIN VI	CTORY CC	MMITTEE 2	2020							
Mailing A	address	47 FLINTLO	OCK DRIVE							
		1					1 1	1 1 1		1 1 1
		SHIRLEY				1 1	NY _I	11	967	1 1
Relations	ship:		CII			L .S1	ATE A		7IP (CODE A
	-					ndraising Re			-	ship PAC S
Designated Ag	Connected gent: Identify		dress (phone r							
Designated Ag Full Name			dress (phone r							
	gent: Identify		dress (phone r							
Full Name	gent: Identify		dress (phone r							
Full Name	gent: Identify		dress (phone r							
Full Name Mailing Add	gent: Identify	by name, add		number – optio		STA			ZIP CO	
Full Name Mailing Add	gent: Identify	by name, add	dress (phone r	number – optio	onal)	STA'			ZIP CO	

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

	g 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 Fu	ndraising Representative	e, or Leadership PAC Spons
HUIZENGA VICTOR	Y FUND		
Mailing Address	P.O. Box 2485		
	Springfield	VA	22152
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Accidented Agents Identifi	, by name, address (phone number — entianal)		
Designated Agent: Identify	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	y by name, address (phone number — optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or ma	CITY A	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION	CITY ▲ ries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor deposit boxes or mails and the second seco	CITY ▲ ries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail ame of Bank, Depository, etc.	CITY CITY ries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail ame of Bank, Depository, etc.	CITY CITY ries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents

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

(h). Joint Fundraisi	ig i aiticipalit.			
1.		FEC	ID number	С
2		FEC	ID number	С
3.		FEC	ID number	С
4.		FEC	ID number	С
Name of Any Connector	Organization, Affiliated Committee, Jo	int Fundraicing B	lonrocontativ	ro or Londorphin DAC Spone
ROUZER CONGRE	_			e, or Leadership FAC Spons
Mailing Address	P.O. Box 701			
	Clayton		NC	27528
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Affiliated Committee Ty by name, address (phone number – op	X Joint Fundrais	ing Represent	tative Leadership PAC Spo
Designated Agent: Identi	_		ing Represent	tative Leadership PAC Spo
Designated Agent: Identi	_		ing Represent	Leadership PAC Spo
Designated Agent: Identi	_		ing Represent	Leadership PAC Spo
Designated Agent: Identi	y by name, address (phone number – op			
Designated Agent: Identi	by by name, address (phone number – op		Ing Represent	Leadership PAC Spo
Pesignated Agent: Identi Full Name L Mailing Address	by by name, address (phone number – op		STATE A	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	cories: List all banks or other depositories aintains funds.	otional) Telephone	STATE A Number	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Identic Full Name	cories: List all banks or other depositories aintains funds.	Telephone in which the com	STATE A Number	ZIP CODE A ts funds, holds accounts, rents

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

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	C
4.			FEC ID number	C
	of Any Connected C	organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. Box 9891		
		Arlington	VA VA	22219
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		by name, address (phone number – optional)		
Fi	nated Agent: Identify ull Name _ _ lailing Address	by name, address (phone number – optional)		
Fi	ull Name	by name, address (phone number – optional)		
Fi	ull Name	by name, address (phone number – optional)		
Fu	ull Name	CITY	STATE A	ZIP CODE A
Fu	ull Name	CITY A	STATE A	ZIP CODE A
Fu M T Banks safety Name	all Name	CITY CITY Tel es: List all banks or other depositories in which that in the standard funds.	ephone Number	s funds, holds accounts, rents

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

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

	ng Participant:		
1.		FEC ID number	or C
2.		FEC ID numbe	er C
3.		FEC ID numbe	er C
4.		FEC ID numbe	er C
_	Organization, Affiliated Committee, Joint	Fundraising Representa	tive, or Leadership PAC Spons
SAM GRAVES VICT			
Mailing Address	2345 GRAND BLVD SUITE 2400		
	KANSAS CITY	MO	64108
Relationship:	CITY A	STATE	▲ ZIP CODE ▲
Full Name			
Full Name			
	CITY A	STATE 4	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	pries: List all banks or other depositories in	Telephone Number	
Mailing Address TITLE OR POSITION	pries: List all banks or other depositories in	Telephone Number	
Mailing Address TITLE OR POSITION	ories: List all banks or other depositories in valuations funds.	Telephone Number	osits funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make a series of Bank,	ories: List all banks or other depositories in valuations funds.	Telephone Number	osits funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	pries: List all banks or other depositories in aintains funds.	Telephone Number	osits funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	pries: List all banks or other depositories in aintains funds.	Telephone Number	posits funds, holds accounts, rents

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

	g 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 I	Fundraising Representativ	e, or Leadership PAC Sponsor
TURNER VICTORY F	UND		
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
П	Organization Affiliated Committee X	Joint Fundraising Represent	tative Leadership PAC Spor
		al)	
Full Name			
Full Name L			
Mailing Address	CITY A	STATE A	ZIP CODE A
	CITY A		ZIP CODE A

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

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

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 Fund	raising Representative	e, or Leadership PAC Spons
DIVID WEIGHT			
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Join y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		t Fundraising Represent	Leadersnip PAC Spo
Pesignated Agent: Identif		t Fundraising Represent	Leadersnip PAC Spo
Pesignated Agent: Identif		t Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identif	y by name, address (phone number – optional)	STATE	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address	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 Ories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Confety deposit boxes or make the proposition of Bank, Depository, etc.	y by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which aintains funds.	STATE A elephone Number	ZIP CODE A

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

ny Connected O	Organization, Affiliate	ad Committee Joint	FEC ID	number number number number	C
-	Prganization, Affiliate	ad Committee Joint	FEC ID	number	C
-	rganization, Affiliate	ad Committee Joint			
-	rganization, Affiliate	ad Committee Joint	FEC ID	number	C
-	rganization, Affiliate	ad Committee laint			
-	rganization, Affiliate	ad Committee Joint			
AHOOD.		sa commutee, joint	Fundraising Rep	resentative	, or Leadership PAC Spor
a Address	824 S. MILLEDGE A	AVENUE			
<u> </u>	SUITE 101				
	ATHENS		I	GA	30605
onship:		CITY A		STATE A	ZIP CODE A
Agent: Identify I	by name, address (p	hone number – optior	al)		
me					
Address					
OR POSITION V	7	CITY A		STATE A	ZIP CODE ▲
		1	Telephone N	umber	
	Agent: Identify I	SUITE 101 ATHENS onship: Connected Organization Aff Agent: Identify by name, address (p	SUITE 101 ATHENS Connected Organization	SUITE 101 ATHENS Onship: Connected Organization Affiliated Committee Agent: Identify by name, address (phone number – optional) Me Address CITY CITY AGGRESA AGRESA CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY	SUITE 101 ATHENS Onship: Connected Organization Affiliated Committee X Joint Fundraising Representa Agent: Identify by name, address (phone number – optional) me Address CITY A STATE A STATE A OR POSITION STATE A

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 Fu	ndraising Representative	e, or Leadership PAC Spons
ANDY BARR VICTO	RY COMMITTEE		
Mailing Address	332 W LEE HWY		
	#303		
	WARRENTON	VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X July 19	oint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Spo
esignated Agent: Identi			Leadership PAC Spo
esignated Agent: Identi			Leadership PAC Spo
resignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		Leadership PAC Spo
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
resignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number	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 pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number ch the committee deposit	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Deposite afety deposit boxes or make the property of the property of the position of the property of the position of the property of the propert	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number ch the committee deposit	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Deposite afety deposit boxes or make the property of the property of the position of the property of the position of the property of the propert	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number ch the committee deposit	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	C
2			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
Name of Any Connected	Organization, Affiliated	Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
WILSON LEADERSH	IP FUND			
Mailing Address	PO BOX 2456			
	SPRINGFIELD		, , , , , VA ,	22152
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliat	ed Committee X Jo	int Fundraising Representa	ative Leadership PAC Spons
Full Name				
Tall Hallo				
Mailing Address				
		CITY A	STATE A	ZIP CODE A
Mailing Address	\	1	STATE Telephone Number	ZIP CODE A

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

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	С
3.			FEC ID number	C
4.			FEC ID number	C
	-	rganization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponsor
TEA	AM GALLAGHER			
N	Mailing Address	1915 SOUTH WEBSTER AVE		
		STE D		
		GREEN BAY	wı ı wı	54301
F	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
8. Desig r	Connected Contacted Agent: Identify b	Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Sponsor
Ful	II Name	<u> </u>		
Ma	uiling Address			
TI	TLE OR POSITION V	CITY A	STATE ▲	ZIP CODE ▲
TI	TLE OR POSITION \		STATE A Telephone Number	ZIP CODE A
9. Banks safety Name Deposi		es: List all banks or other depositories in which	Telephone Number	s funds, holds accounts, rents

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

1							
2.				FEC I	D number	C	
				FEC I	D number	С	
3.				FEC I	D number	C	
4.				FEC I	D number	С	
Name of Any Cor	nnected O	ganization, Affil	iated Committee, Joint	Fundraising Re	presentativ	e, or Leaders	hip PAC Spons
STRONG AMI	IERICA FL	JND					
Mailing Addre	ress	824 S MILLEDGE	E AVE, STE 101				
		ATHENS			GA L	30605	
Date:			CITY A		STATE A	Ž	ZIP CODE A
	Connected C		Affiliated Committee	S Joint Fundraisin	g Representa	ative Lea	adership PAC Sp
	Connected C				g Representa	ative Lea	adership PAC Sp
esignated Agent	t: Identify b				g Representa	ative Lea	adership PAC Sp
Pesignated Agent	t: Identify b				g Representa	ative Lea	adership PAC Sp
esignated Agent	t: Identify b				g Representa	ative Lea	adership PAC Sp
resignated Agent	t: Identify b	y name, address			g Representa		adership PAC Sp

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 , WALORSKI VICTOR	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 26141		
	Relationship:	ALEXANDRIA CITY	VA VA STATE ▲	22313 ZIP CODE ▲
	riolationomp.	GIT A	SIAIL	ZIF GODE A
8.	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	1			
			ephone Number	
;	Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which th aintains funds.		
;	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which th aintains funds.	ne committee deposit	
;	safety deposit boxes or ma	ries: List all banks or other depositories in which th aintains funds.	ne committee deposit	

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

			FEC I	D number	C
	<u> </u>		FEC I	D number	С
			FEC I	D number	C
	1 1 1 1 1 1		 FEC I	D number	С
ny Connected	Organization Af	filiated Committee Laint	Fundraioina Da	nrocentativ	o or Londovskin DAC Spans
-	_		rundraising ne		e, or Leadership FAC Spons
ng Address	1919 OXMOOF	R ROAD			
	#223				
	HOMEWOOD			L AL	35209
ionship:		CITY A		STATE A	ZIP CODE ▲
Agent: Identity	by name, addres	ss (phone number – optio	nal)		
me	by name, addres	ss (phone number – optio	nal)		
	by name, addres	ss (phone number – optio	nal)		
me	by name, addres	ss (phone number – optio	nal)		
me	by name, address		nal)		
me		city A	nal)	STATE A	ZIP CODE A
i	R VICTORY C	R VICTORY COMMITTEE 1919 OXMOOF #223 HOMEWOOD ionship: Connected Organization	R VICTORY COMMITTEE ag Address 1919 OXMOOR ROAD #223 HOMEWOOD ionship: CITY	R VICTORY COMMITTEE 1919 OXMOOR ROAD #223 HOMEWOOD ionship: CITY	ng Address #223 HOMEWOOD AL STATE ▲

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

FEC ID number 2. 3. 4. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spons. REED VICTORY COMMITTEE Mailing Address 824 S. MILLEDGE AVENUE SUITE 101 ATHENS GA 30605 Relationship: CITY A STATE A ZIP CODE A Tille OR POSITION CITY A STATE A ZIP CODE A Telephone Number Tille OR POSITION Telephone Number		ng Participant:		
S	1.		FEC ID number	С
A. FEC ID number C Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponser REED VICTORY COMMITTEE Mailing Address Suite 101 ATHENS Relationship: City A State A Zip Code A Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address City A State A Zip Code A Zip Code A Zip Code A State A Zip Code A Zip Code A State A Zip Code A Zip Code A	2.		FEC ID number	С
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponse REED VICTORY COMMITTEE Mailing Address 824 S. MILLEDGE AVENUE SUITE 101 ATHENS GA 30605 Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee ■ Joint Fundraising Representative ■ Leadership PAC Sponsesignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	3.		FEC ID number	C
REED VICTORY COMMITTEE Mailing Address 824 S. MILLEDGE AVENUE SUITE 101 ATHENS GA 30605 Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spc Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	4.		FEC ID number	С
Mailing Address 824 S. MILLEDGE AVENUE	Name of Any Connected	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
Mailing Address SUITE 101 ATHENS Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	REED VICTORY CO	DMMITTEE		
Mailing Address SUITE 101 ATHENS Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲				
ATHENS Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	Mailing Address	824 S. MILLEDGE AVENUE		
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo		SUITE 101		
Connected Organization		ATHENS	GA L	30605
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲		fy by name, address (phone number – optional)		
TITLE OR POSITION ▼	Designated Agent: Ident	fy by name, address (phone number – optional)		
TITLE OR POSITION ▼	Designated Agent: Ident	fy by name, address (phone number – optional)		
	Designated Agent: Ident	fy by name, address (phone number – optional)		
	Designated Agent: Ident Full Name Mailing Address	CITY A	STATE A	ZIP CODE A
	Designated Agent: Ident Full Name Mailing Address	CITY A	1	ZIP CODE A
	Pesignated Agent: Ident Full Name _ _ Mailing Address TITLE OR POSITION	CITY A cries: List all banks or other depositories in which	Telephone Number	
Name of Bank, Depository, etc.	Pesignated Agent: Ident Full Name	CITY ▲ CITY ▲ Ories: List all banks or other depositories in which naintains funds.	Telephone Number	s funds, holds accounts, rents
	Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or not be safety deposit boxes or not be safety depository, etc.	CITY ▲ CITY ▲ Ories: List all banks or other depositories in which naintains funds.	Telephone Number	s funds, holds accounts, rents
Depository, etc.	Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or not be safety deposit boxes or not be safety depository, etc.	CITY ▲ CITY ▲ Ories: List all banks or other depositories in which naintains funds.	Telephone Number	s funds, holds accounts, rents
Depository, etc.	Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or not be safety deposit boxes or not be safety depository, etc.	CITY ▲ CITY ▲ Ories: List all banks or other depositories in which naintains funds.	Telephone Number	s funds, holds accounts, rents

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

			FEC	D number	С
			FEC	D number	С
			FEC	D number	C
			FEC	D number	C
Any Connected (Organization, Affi	liated Committee. Joint	Fundraising Re	epresentativ	e. or Leadership PAC Spons
ESTES					
ng Address	P.O. BOX 2614	1			
	ALEXANDRIA			VA 	22313
ionship:		CITY A		STATE A	ZIP CODE ▲
		s (phone number – optio	nal)		
d Agent: Identify		s (phone number – optio	nal)		
d Agent: Identify		s (phone number – optio	nal)		
d Agent: Identify		s (phone number – optio	nal)		
d Agent: Identify me L Address	by name, address		nal)	STATE A	ZIP CODE A
d Agent: Identify	by name, address	s (phone number – optio	nal)	STATE A	ZIP CODE A
	ESTES ionship:	P.O. BOX 2614	P.O. BOX 26141 ALEXANDRIA ionship: CITY	The connected Organization, Affiliated Committee, Joint Fundraising Research Stress P.O. BOX 26141 ALEXANDRIA ionship: CITY CITY	FEC ID number Inny Connected Organization, Affiliated Committee, Joint Fundraising Representative ESTES P.O. BOX 26141 ALEXANDRIA VA STATE

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

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
Name of Any Connected	I Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spons
	BARR COMMITTEE		
Mailing Address	332 W. LEE HIGHWAY		
	#303		
	WARRENTON	VA	20186
	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Jo	pint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo	pint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo		
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Jo	state A	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo		
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Journal of the position	STATE A Telephone Number ch the committee deposit	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Deposit afety deposit boxes or make the property of the prop	Affiliated Committee X Journal of the position	STATE A Telephone Number	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	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e. or Leadership PAC Spon
MAST VICTORY CO			
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Joint	t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
		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 S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identii 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 mane of Bank,	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 management of Bank,	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 mane of Bank, epository, etc.	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 mane 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

			FEC FEC	ID number ID number	С	
			FEC	ID number		
					C	
			FEC	ID number	C	
			1 20	ID number	С	
onnected Or	rganization, Affili	iated Committee, Joir	nt Fundraising F	Representativ	e, or Leaders	ship PAC Spons
ERS VICTO	RY					
dress	2523 WILSON BO	OULEVARD				
	#4					
	ARLINGTON			VA	22201	
ıp:		CITY A		STATE A		ZIP CODE ▲
nt: Identify b	y name, address	(phone number – opti	onal)			
	y name, address	(phone number – opti	onal)			
ent: Identify b	y name, address	(phone number – opti	onal)			
	y name, address	(phone number – opti	ional)			
	y name, address		ional)	CTATE A	77	
		(phone number – opti	ional)	STATE A		IP CODE A
i	dress	#4 ARLINGTON	dress 2523 WILSON BOULEVARD #4 ARLINGTON p: CITY •	dress 2523 WILSON BOULEVARD #4 ARLINGTON p: CITY	dress 2523 WILSON BOULEVARD #4 ARLINGTON VA STATE STATE	dress 2523 WILSON BOULEVARD #4 ARLINGTON VA 22201 p: CITY STATE

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

(h). Joint Fund						
1.			FEC ID n	umber	C	
2			FEC ID n	umber	С	
3.			FEC ID n	umber	С	
4.			FEC ID n	umber	С	
lame of Any Conne	ected Organization,	Affiliated Committee, Joint	Fundraising Repres	sentative	, or Leadership P	AC Spons
ALLEN VICTOR	Y FUND					
	PO BOX 42	0521				
Mailing Address	S	0321				
	_I ATLANTA			GA	30342]-[
	nected Organization	CITY Affiliated Committee dress (phone number – option	Joint Fundraising R	TATE ▲ epresenta		ODE ▲
Con	nected Organization	Affiliated Committee X	Joint Fundraising R			
esignated Agent:	nected Organization	Affiliated Committee X	Joint Fundraising R			
esignated Agent: In	nected Organization	Affiliated Committee X	Joint Fundraising R			ODE Anip PAC Sp
esignated Agent: In	nected Organization	Affiliated Committee X	Joint Fundraising R			
esignated Agent: In Full Name Mailing Address	nected Organization dentify by name, add	Affiliated Committee X	Joint Fundraising R			nip PAC Sp
esignated Agent: In	nected Organization dentify by name, add	Affiliated Committee	Joint Fundraising R	epresenta	tive Leadersh	nip PAC Sp

FEC Form 1S (Revised 02/2017)

Optional Supple for Lines 5(g) or

)pti	ional S	Supp	len	nent	al	ln	formati	or
or	Lines	5(g)	or	(h),	6,	8	and/or	9

1.						
ا م				FEC	ID number	C
2				FEC	ID number	С
3. 🔟				FEC	ID number	С
4				FEC	ID number	C
	Any Connected	Organization, Aff	iliated Committee, Joint	Fundraising R	epresentativ	e, or Leadership PAC Spons
Mailir	ng Address	PO BOX 97275				
		RALEIGH			NC NC	27624
			CITY A		STATE ▲	ZIP CODE ▲
Designated	d Agent: Identify	Organization by name, addres	Affiliated Committee	≺ Joint Fundrais	ng Represent	tative Leadership PAC Sp
Designated Full Na	Connected d Agent: Identify				ng Represent	tative Leadership PAC Sp
Designated Full Na	Connected				ng Represent	tative Leadership PAC Sp
Designated Full Na	Connected d Agent: Identify				ing Represent	Leadership PAC Sp
Designated Full Na Mailing	Connected d Agent: Identify me	by name, addres	es (phone number – optio			
Designated Full Na Mailing	Connected d Agent: Identify	by name, addres			STATE A	Leadership PAC Sp

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

1							
				FEC I	D number	C	_
2				FEC I	D number	С	_
3				FEC I	D number	С	
4				FEC I	D number	C	_
	any Connected	_	Affiliated Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spo	ons
		D.O. DOV. 40					
Mailir	ng Address	P.O. BOX 42	0304				
		ATLANTA			GA L	30342	
					STATE A	ZIP CODE A	
		organization by name, addition	CITY A Affiliated Committee	Soint Fundraisin			
Designated Full Na	Connected d Agent: Identify		Affiliated Committee				
Designated Full Na	Connected d Agent: Identify		Affiliated Committee				
Designated Full Na	Connected d Agent: Identify		Affiliated Committee				
Designated Full Na Mailing	Connected d Agent: Identify me	by name, addr	Affiliated Committee		ng Representa	Leadership PAC	
Designated Full Na Mailing	Connected d Agent: Identify	by name, addr	Affiliated Committee		ng Representa		

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

FEC Form 1S (Revised 02/2017)

5(g) c	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
S .	-	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Davidson Victory Fund	! 		
	Mailing Address	499 S. Capitol Street SW		
		Suite 407		
		Washington	DC	20003
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponso
3.	Designated Agent: Identify Full Name	by name, address (phone number – optional)	1 1 1 1 1 1 1	
l.		by name, address (phone number – optional)		
i.	Full Name	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
3.	Full Name	CITY A	STATE A	ZIP CODE A
i.	Full Name	CITY		
3.	Full Name Mailing Address TITLE OR POSITION TO THE PROPERTY OF THE PRO	CITY A Te es: List all banks or other depositories in which to	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositori safety deposit boxes or main Name of Bank, Depository, etc.	CITY A Te es: List all banks or other depositories in which to	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION TO THE PROPERTY OF THE PRO	CITY A Te es: List all banks or other depositories in which to	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositori safety deposit boxes or main Name of Bank, Depository, etc.	CITY A Te es: List all banks or other depositories in which to	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositori safety deposit boxes or main Name of Bank, Depository, etc.	CITY A Te es: List all banks or other depositories in which to	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Optional Suppler for Lines 5(g) or

)pt i	ional	Supp	lem	nent	al	ln	formati	on
for	Lines	5(g)	or	(h),	6,	8	and/or	9

	g Participant:				
1			FEC II	0 number	С
2.			FEC II	0 number	C
3.			FEC II) number	С
4.			FEC II	0 number	С
Name of Any Connected	Organization, Affilia	ted Committee, Joint	Fundraising Re	oresentativ	e, or Leadership PAC Sponso
CRAMER VICTORY I	FUND				
Mailing Address	PO BOX 26141				
	ALEXANDRIA			VA I	22313
Relationship:		CITY A		STATE A	ZIP CODE ▲
п.	d Organization	_	Joint Fundraisin		
Full Name					
Mailing Address					
			I		
TITLE OR POSITION	▼	CITY A		STATE A	ZIP CODE ▲
TITLE OR POSITION	V	CITY A	Telephone N		ZIP CODE ▲

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

(h). Joint Fundraisi	ig Participant.			
1.		FE	EC ID number	С
2.		FE	EC ID number	С
3.		FE	EC ID number	C
4		FE	EC ID number	C
Name of Any Connected	Organization, Affiliated Committ	ee, Joint Fundraising	g Representativ	e, or Leadership PAC Spons
Mailing Address	228 S. Washington Street			
	Suite 115			
	Alexandria		VA	22314
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Comm		raising Represent	ative Leadership PAC Spo
Connecte	d Organization Affiliated Comm		raising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Comm		raising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Comm		raising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Comm		raising Represent	
Connecte Designated Agent: Identif	d Organization Affiliated Commy by name, address (phone number		raising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name Mailing Address	d Organization Affiliated Commy by name, address (phone number	er – optional)		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Commy by name, address (phone number of the community of the community by name, address (phone number of the community of the commu	er – optional)	STATE Ane Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Commy by name, address (phone number of the community of the community by name, address (phone number of the community of the commu	Telepho	STATE Ane Number	ZIP CODE A

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

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

1.		FEC ID numbe	C
2		FEC ID numbe	C
3.		FEC ID numbe	C
4.		FEC ID numbe	C
-	Organization, Affiliated Committee, Joint F	Fundraising Representat	ive, or Leadership PAC Spons
JAKE ELLZEY VICT	ORY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE	▲ ZIP CODE ▲
		Joint Fundraising Represe	ntative Leadership PAC Spo
	Affiliated Committee X fy by name, address (phone number – option		Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Pesignated Agent: Identi			Leadership PAC Spo
Pesignated Agent: Identi			Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – options		ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – options	al)	
Pesignated Agent: Identi Full Name	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in w	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in waintains funds.	STATE A	ZIP CODE A
Pesignated Agent: Identify Full Name	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identify Full Name	fy by name, address (phone number – options) CITY CITY pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A

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	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representative	e. or Leadership PAC Spon
NCFL			
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name			
Mailing Address			
TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	CITY A	STATE Telephone Number	ZIP CODE A
anks or Other Depositorafety deposit boxes or ma	ries: List all banks or other depositories in waintains funds.	Telephone Number	s funds, holds accounts, rent
	ries: List all banks or other depositories in waintains funds.	Telephone Number	s funds, holds accounts, rent
anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	ries: List all banks or other depositories in waintains funds.	Telephone Number	s funds, holds accounts, rent

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

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	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint F	ındraising Benresentativ	o or Leadershin PAC Snons
GARRET GRAVES			e, or Leadership FAC Spons
Mailing Address	PO BOX 64845		
	BATON ROUGE	LA LA	70896
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Designated Agent: Identit	y by name, address (phone number - optiona	1)	
Full Name	y by name, address (phone number – optiona)	
	y by name, address (phone number – optiona	i)	
Full Name	y by name, address (phone number – optiona		
Full Name			
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or means and safety deposit boxes or means and safety deposit boxes.	CITY A pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or means and safety deposit boxes or means and safety deposit boxes.	CITY A pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ts funds, holds accounts, rents

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

(h). Joint Fundraising	g Participant:		
1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected (Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Sponsor
THE MILLS VICTORY	FUND		
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	ı VA ı	22314
Relationship:	CITY A	STATE A	ZIP CODE A
Tiolationionip.		pint Fundraising Representa	
Pesignated Agent: Identify	by name, address (phone number - optional)		
Pesignated Agent: Identify Full Name	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	CITY		ZIP CODE A

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

Connected C	_		FEC ID	number number number	C C Or Leadership PAC Spons
VICTORY F	JND 		FEC IC	number number	C
VICTORY F	JND 		FEC IC) number	C
VICTORY F	JND 				
VICTORY F	JND 		Fundraising Rep	presentative,	or Leadership PAC Spons
Address	PO BOX 18502				
Address	PO BOX 18502				
	HUNTSVILLE			AL	35804
ship:		CITY A		STATE ▲	ZIP CODE ▲
dross	<u> </u>				
uiess					
					1
DOOLTION -	_	CITY A	· · · · · · · · · · · · · · · · · · ·	STATE A	ZIP CODE ▲
RPOSITION		1	Talanhana N		
			Telephone N	umber	
	Connected of gent: Identify I	Connected Organization gent: Identify by name, address	Connected Organization Affiliated Committee gent: Identify by name, address (phone number – option dress	Connected Organization	Connected Organization

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

	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	indraising Representative	e, or Leadership PAC Spons
MAX MILLER VICTO			·
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identify	by name, address (phone number - optional)	
Full Name	by name, address (phone number – optional)	
	by name, address (phone number – optional		
Full Name	by name, address (phone number – optional		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors of Eafety deposit boxes or main and the safety de	CITY A ries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	es funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors of Bank, Depository, etc.	CITY A ries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	es funds, holds accounts, rents

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

g Participant:		
<u> </u>	FEC ID number	С
<u> </u>	FEC ID number	C
	FEC ID number	С
	FEC ID number	С
Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
MER VICTORY		
13203 SE 172ND AVE		
STE 166 #399		
HAPPY VALLEY	OR	97086
CITY A	STATE ▲	ZIP CODE ▲
Organization Affiliated Committee	laint Fundraining Panragant	tative Leadership PAC Spor
▼ CITY ▲	STATE ▲	ZIP CODE ▲
	Telephone Number	
ion List all banks or other depositories in wh	ich the committee denoci	to fundo holdo appounto ronto
intains funds.	ion the committee deposit	to rando, rioldo addeditio, romo
	Drganization, Affiliated Committee, Joint Fu MER VICTORY 13203 SE 172ND AVE STE 166 #399 HAPPY VALLEY CITY A Organization Affiliated Committee X J by name, address (phone number – optional) CITY A CITY A	FEC ID number FE

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

			FEC II	O number	С
			FEC II	O number	C
			FEC II	O number	С
	1 1 1 1 1		 FEC II	O number	С
onnooted Or	ragnization Aff	ilioted Committee Joint	Fundraicing Po	ara contative	or Leadarship BAC Span
dress	1327 H STREE	T			
	STE 101				
	LINCOLN			NE	68508
ip:		CITY A		STATE A	ZIP CODE ▲
nt: Identify b	y name, addres	ss (phone number – optio	nal)		
nt: Identify b	y name, addres	ss (phone number – optio	nal)		
ess	y name, addres	s (phone number – optio	nal)		
	y name, addres	s (phone number – optio	nal)		
	y name, addres	s (phone number – optio	nal)		
		city A		STATE A	ZIP CODE A
-	D VICTOR' dress	D VICTORY FUND dress 1327 H STREE STE 101 LINCOLN	D VICTORY FUND dress 1327 H STREET STE 101 LINCOLN p: CITY	onnected Organization, Affiliated Committee, Joint Fundraising Rep D VICTORY FUND dress 1327 H STREET STE 101 LINCOLN p: CITY CITY	p: FEC ID number FEC ID number

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

(h). Joint Fundraisir	•		
1		FEC ID numb	er C
2.		FEC ID numb	er C
3.		FEC ID numb	er C
4.		FEC ID numb	er C
VICTORY 2024	Organization, Affiliated Committee, Joint F	undraising Represent	ative, or Leadership PAC Spons
Mailing Address	22780 INDIAN CREEK DRIVE STE 100		
	DULLES	VA	20166
Relationship:	CITY ▲	STATE	ZIP CODE ▲
	d Organization Affiliated Committee X by by name, address (phone number – optional	Joint Fundraising Repres	sentative Leadership PAC Sp
			Sentative Leadership PAC Sp
Designated Agent: Identif			Sentative Leadership PAC Sp
Designated Agent: Identif			Sentative Leadership PAC Sp
Designated Agent: Identif	by name, address (phone number – optional	al)	
Designated Agent: Identif	by name, address (phone number – optiona		
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optiona	al)	
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	city A ries: List all banks or other depositories in waintains funds.	STATE Telephone Number thich the committee dep	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or mails afety deposit boxes or mails afety depository, etc	city A ries: List all banks or other depositories in waintains funds.	STATE Telephone Number hich the committee dep	ZIP CODE A Dosits funds, holds accounts, rents
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor Cafety deposit boxes or mail	ries: List all banks or other depositories in waintains funds.	STATE Telephone Number hich the committee dep	ZIP CODE A Dosits funds, holds accounts, rents

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

(h). Joint Fundrais	ng Participant:			
1.		FE(C ID number	С
2		FE(C ID number	С
3.		FE0	C ID number	С
4.		 	C ID number	С
-	I Organization, Affiliated Committe USE NEW YORK 2024	e, Joint Fundraising	Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844			
	BETHESDA		MD	20824
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
Connect	ed Organization Affiliated Commi		ising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Commi		ising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident	ed Organization Affiliated Commi		ising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Commi		ising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	Affiliated Committee of Organization Affiliated Committee of Property of States of Committee of			
Connect Designated Agent: Ident Full Name	Affiliated Comming of the property of the prop		ising Represent	Leadership PAC Spo
Connect Designated Agent: Ident Full Name Mailing Address	Affiliated Comming of the property of the prop	r – optional)		
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION	Affiliated Comming of the price	r – optional)	STATE A e Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be safety deposit boxes or not be safety depository, etc.	Affiliated Comming of the price	r – optional) Telephon tories in which the cor	STATE A e Number	ZIP CODE A

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

FEC Form 1S (Revised 02/2017)

5(g) or ((h). Joint Fundraisi r	ng Participant:		
	1.		FEC ID number	er C
	2.		FEC ID number	er C
	3		FEC ID number	er C
	4.		FEC ID number	er C
6. N	lame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representa	tive, or Leadership PAC Sponsor
	TEAM BRANDON VI	CTORY COMMITTEE		
	Mailing Address	PO BOX 3580		
		SYRACUSE	NY	13220
	Relationship:	CITY A	STATE	▲ ZIP CODE ▲
	Connecte	d Organization Affiliated Committee	✓ Joint Fundraising Repres	entative Leadership PAC Sponsor
8. D	esignated Agent: Identif	y by name, address (phone number – optic	nal)	
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
		▼	STATE A	ZIP CODE A
sa N	TITLE OR POSITION	pries: List all banks or other depositories in aintains funds.	Telephone Number	
sa N	TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of Bank, Depository, etc.	pries: List all banks or other depositories in aintains funds.	Telephone Number	osits funds, holds accounts, rents
sa N	TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of Bank,	pries: List all banks or other depositories in aintains funds.	Telephone Number	osits funds, holds accounts, rents

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

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	C
-	Organization, Affiliated Committee, Joint Fu JSE CALIFORNIA 2024	ndraising Hepresentative	e, or Leadersnip PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identit	y by name, address (phone number - optional))	
Designated 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	y by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank,	CITY ▲ Pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY ▲ Pries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank,	CITY A pries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents

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

	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 Fundr	raising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 441446		
Relationship:	INDIANAPOLIS CITY A	IN STATE A	46244 ZIP CODE ▲
		Fundraising Representa	
Designated Agent: Identify	by name, address (phone number - optional)		
Pesignated Agent: Identify Full Name	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 A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A CITY A ies: List all banks or other depositories in which intains funds.	elephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail	CITY A CITY A ies: List all banks or other depositories in which intains funds.	elephone Number the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail lame of Bank, Depository, etc.	CITY CITY Teles: List all banks or other depositories in which ntains funds.	the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail lame of Bank, Depository, etc.	CITY CITY Teles: List all banks or other depositories in which ntains funds.	the committee deposit	s funds, holds accounts, rents

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

1		g Participant:				
				FEC ID	number	С
2				FEC ID	number	С
3.				FEC ID	number	С
4.				FEC ID	number	C
	-		ated Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spons
MCC	ORMICK VICTO	RY FUND				
Ма	ulling Address	PO BOX 183				1 1 1 1 1 1 1 1 1
		HUDSON			WI	54016
Re	lationship:		CITY A		STATE A	ZIP CODE ▲
Full 1	Name					
Mailir	ng Address					
					1 1 1	
TITL	LE OR POSITION	-	CITY A	5	STATE A	ZIP CODE A

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

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
-	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponso
Mailing Address	PO BOX 120		
	CLARENCE	NY NY	14031
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	ify by name, address (phone number – optional)		
Mailing Address			
			<u> </u>
TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	▼	STATE A	ZIP CODE A
	ories: List all banks or other depositories in which naintains funds.	elephone Number	s funds, holds accounts, rents
Banks or Other Deposite safety deposit boxes or management of Bank,	ories: List all banks or other depositories in which naintains funds.	Telephone Number	s funds, holds accounts, rents
Banks or Other Deposite Safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in which naintains funds.	Telephone Number	s funds, holds accounts, rents
Banks or Other Deposite the safety deposite boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in which naintains funds.	Telephone Number	s funds, holds accounts, rents

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

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

1.	ganization, Affiliated Committee, Join FUND P.O. BOX 35103 TUCSON	FEC ID number	r C r C
3. 4. Name of Any Connected Org	P.O. BOX 35103	FEC ID numbe	r C
A. CISCOMANI VICTORY Mailing Address	P.O. BOX 35103	FEC ID numbe	r C
Name of Any Connected Org	P.O. BOX 35103		
CISCOMANI VICTORY Mailing Address	P.O. BOX 35103	Fundraising Representation	tive, or Leadership PAC Spons
Mailing Address	P.O. BOX 35103		
L Relationship:	TUCSON		
Relationship:	TUCSON		
Relationship:		AZ	85740
	CITY ▲	STATE	▲ ZIP CODE ▲
Full Name			
Mailing Address			
L			
L	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION ▼	OHT A	SIAIE	ZIF CODE A
		Telephone Number	
Banks or Other Depositories safety deposit boxes or maintain Name of Bank, Depository, etc. Mailing Address		which the committee depo	
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FEC Form 1S (Revised 02/2017) for Line

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
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lame of Any Connector	l Organization, Affiliated Committee, Joint Fun	draining Popresentative	o or Londorphin DAC Spon
CHIP ROY VICTOR		indising representative	, or Ecuacionip PAO opon
Mailing Address	6705 W. HWY 290 SUITE 50295		
	AUSTIN	TX	78735
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Jo	int Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Representation	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 mame of Bank, epository, etc.	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

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

RY FUND SSS 1600 WEST LOOP S STE 620 CITY A STATE A ZIP CODE A Identify by name, address (phone number – optional)	FEC ID number FEC ID number C FEC ID number C FEC ID number C FEC ID number C Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsory VICTORY FUND ITAL 177027 HOUSTON Affiliated Committee CITY A STATE A ZIP CODE A Address Address COnnected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsory Leadership PAC Sponsory Talephone Number Telephone Number Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents osit boxes or maintains funds. Bank, etc.	2	(h). Joint Fundrais	sing Farticipant.		
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RY FUND 1600 WEST LOOP S STE 620 STATE A ZIP CODE A CITY A STATE A ZIP CODE A CITY A STATE A ZIP CODE A CITY A STATE A ZIP CODE A	Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsory VICTORY FUND Ing Address Ing Addres	A. FEC ID number C	2.		FEC ID number	C
nected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sport FUND 1600 WEST LOOP S STE 620 LOOP S STE 620 CITY A STATE A ZIP CODE A CITY A STATE A ZIP CODE A CITY A STATE A ZIP CODE A	Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponse VICTORY FUND Ing Address 1600 WEST LOOP S STE 620	lame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spons BABIN VICTORY FUND Mailing Address	3.		FEC ID number	C
RY FUND SSS 1600 WEST LOOP S STE 620 CITY A STATE A ZIP CODE A Identify by name, address (phone number – optional)	NICTORY FUND Ing Address I 1600 WEST LOOP S STE 620 HOUSTON TX 77027 TODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo I Address COR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number Telephone State & Telephone Number Telephone State & Telephone Number Telephone State & Telepho	BABIN VICTORY FUND Mailing Address 1600 WEST LOOP S STE 620 HOUSTON Relationship: Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY A STATE A ZIP CODE A Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number	4.		FEC ID number	C
TX 77027 CITY A STATE A ZIP CODE A	Ing Address 1600 WEST LOOP S STE 620	Mailing Address 1600 WEST LOOP S STE 620	lame of Any Connecte	ed Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponse
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CITY A STATE A ZIP CODE A	tionship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spond Agent: Identify by name, address (phone number – optional) Address CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number	Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization				
Affiliated Committee X Joint Fundraising Representative Leadership PAC Identify by name, address (phone number – optional)	Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo d Agent: Identify by name, address (phone number – optional) ame OTHER DEPOSITION Telephone Number Telephone Number Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents osit boxes or maintains funds.	Connected Organization Affiliated Committee		HOUSTON	TX	77027
Identify by name, address (phone number – optional)	d Agent: Identify by name, address (phone number – optional) ame Jandress CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents osit boxes or maintains funds.	esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY A STATE A ZIP CODE A Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rentatety deposit boxes or maintains funds. ame of Bank, epository, etc.	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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SITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents osit boxes or maintains funds. Bank, etc.	Telephone Number	Full Name	tify by name, address (phone number – optional)		
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	Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents osit boxes or maintains funds. Bank, etc.	anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents afety deposit boxes or maintains funds. ame of Bank, epository, etc.	Full Name			
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	ling Addı	Mailing Addı	Full Name			
		CITY ▲ STATE ▲ ZIP CODE ▲	Full Name Mailing Address TITLE OR POSITION Banks or Other Depose afety deposit boxes or lame of Bank, Depository, etc.	CITY ▲ CITY ▲ itories: List all banks or other depositories in which maintains funds.	elephone Number the committee deposits	s funds, holds accounts, rents

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

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

1.	P.O. BOX 1575 ROSWELL CITY	FEC I	GA		adership PAC Spons
3. 4. Name of Any Connected O MTG VICTORY FUND, Mailing Address Relationship:	P.O. BOX 1575 ROSWELL CITY A	FEC I	D number presentativ	C C e, or Lea	
A. Name of Any Connected O MTG VICTORY FUND, Mailing Address Relationship: Connected O	P.O. BOX 1575 ROSWELL CITY A	FEC I	epresentativ	e, or Lea	
Name of Any Connected O MTG VICTORY FUND, Mailing Address Relationship: Connected C	P.O. BOX 1575 ROSWELL CITY A		epresentativ	e, or Lea	
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Relationship:	ROSWELL CITY A			30	077
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			STATE A		ZIP CODE ▲
	Allillated Committee	Joint Fundraisir	na Renresent	ative	Leadership PAC Sp
Full Name Mailing Address	<u> </u>				
TITLE OR POSITION ▼	CITY ▲		STATE ▲		ZIP CODE ▲
		Telephone I	Number _		
Banks or Other Depositories safety deposit boxes or main Name of Bank, Depository, etc.	s: List all banks or other depositories in watains funds.		nittee deposi		
Mailing Address	<u> </u>				
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FEC Form 1S (Revised 02/2017) for Lines 5(g)

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

	g 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 F	undraioina Donrocontoti	us or Landarship DAC Spans
AARON BEAN TEAM		unuraising nepresentati	ve, or Leadership FAC Spons
Mailing Address	2640-A MITCHAM DRIVE		
	TALLAHASSEE	FL	32308
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
Connected Designated Agent: Identify	Organization Affiliated Committee X by name, address (phone number – optional	Joint Fundraising Represer	Leadership FAC Spo
			Leadership PAC Spo
Designated Agent: Identify			Leadership FAC Spc
Designated Agent: Identify Full Name			Leadership FAC Spc
Designated Agent: Identify Full Name			Leadership FAC Spc
Designated Agent: Identify Full Name	by name, address (phone number – optional		ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional	NI)	
Designated Agent: Identify Full Name	by name, address (phone number – optional control of the control o	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or main the safety deposition of Bank, Depository, etc.	by name, address (phone number – optional control of the control o	STATE A Telephone Number hich the committee depos	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor cafety deposit boxes or main and the safety deposit	by name, address (phone number – optional control of the control o	STATE A Telephone Number hich the committee depos	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

or(h). Joint Fundrais	ing Participant:				
1.			FEC	D number	C
2.			FEC	D number	С
3.			FEC	D number	С
4.			FEC	D number	С
LALOTA VICTORY		iated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Sponso
Mailing Address	PO BOX 183				
	HUDSON		I	WI	54016
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connec	ted Organization	Affiliated Committee	≺ Joint Fundraisi	ng Represent	ative Leadership PAC Spor
Designated Agent: Iden	tify by name address	c (nhone number – ontio	nal)		
	my by hame, address	(priorie riamber optie	riai)		
Full Name					
Mailing Address					
	I		1	1 1	1 1 1
TITLE OR POSITIO	N ▼	CITY A		STATE ▲	ZIP CODE ▲
TITLE OR POSITIO	N ▼	CITY A	Telephone		ZIP CODE A

FEC Form 1S (Revised 02/2017) for

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

	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
TEAM OGLES			, or L oudoromp 1710 Opono
Mailing Address	P.O. BOX 183		
	HUDSON	WI	54016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identify	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name			7/D 0005 4
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main and the safety deposit	CITY ▲ ries: List all banks or other depositories in whitintains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY CITY ries: List all banks or other depositories in whitintains funds.	STATE Telephone Number ch the committee deposit	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

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
lame of Any Connected	l Organization, Affiliated Committee, Joint Fund	draising Representative	e or Leadership PAC Spons
AMERICAN BATTLE			,
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Joi	nt Fundraising Representa	Leadership PAC Spo
Connected Agent: Identification	ed Organization Affiliated Committee X Joi	nt Fundraising Representa	Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Joi	nt Fundraising Representa	Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Joi	nt Fundraising Representa	Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	Affiliated Committee X Joint J	nt Fundraising Representa	Leadership PAC Spo
Connecte resignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint J		
Connecte resignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A
Connected Resignated Agent: Identification of Position	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A

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

Optional	Suppler	nental	In	formati	or
for Lines	s 5(g) or	(h), 6,	8	and/or	9

	ng Participant:		
1.		FEC ID numl	per C
2		FEC ID numl	per C
3.		FEC ID numl	per C
4.		FEC ID numl	per C
-	d Organization, Affiliated Committee, Joint	Fundraising Represent	tative, or Leadership PAC Spons
SCALISE LEADERS	5HIP FUND 2024		
Mailing Address	320 1ST ST SE		
	WASHINGTON		20003
Relationship:	CITY A	STAT	E ▲ ZIP CODE ▲
ooigilatoa 7 igoila 1461.	fy by name, address (phone number - option	nal)	
Full Name	ly by name, address (prione number – optio	nal)	
	lly by name, address (phone number – optio	nal)	
Full Name	lly by name, address (prione number – optio	nal)	
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Full Name	CITY A	nal)	▲ ZIP CODE ▲
Full Name	CITY A		
Full Name _ _ Mailing Address	CITY A	STATE Telephone Number	
Full Name _ _ Mailing Address	CITY ▲ ories: List all banks or other depositories in	STATE Telephone Number	
Full Name Mailing Address TITLE OR POSITION	CITY ▲ Ories: List all banks or other depositories in naintains funds.	STATE Telephone Number which the committee de	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or management of Bank,	CITY ▲ Ories: List all banks or other depositories in naintains funds.	STATE Telephone Number which the committee de	posits funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY ▲ Ories: List all banks or other depositories in naintains funds.	STATE Telephone Number which the committee de	posits funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY ▲ Ories: List all banks or other depositories in naintains funds.	STATE Telephone Number which the committee de	posits funds, holds accounts, rents

FEC Form 1S (Revised 02/2017) for

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

5(g) or (h). Joint Fundraisir	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	ime of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
L	LIVINER WASORTT			
L				
	Mailing Address	824 S. MILLEDGE AVE. STE. 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
8. De :		y by name, address (phone number - optional)		
8. De :	Full Name	y by name, address (phone number – optional)		
8. De :		y by name, address (phone number – optional)		
8. De :	Full Name	y by name, address (phone number – optional)		
8. De :	Full Name		CTATE A	ZIR CODE A
8. De :	Full Name	CITY A	STATE A	ZIP CODE A
8. De :	Full Name	CITY A	STATE A ephone Number	ZIP CODE A
9. Ba saf Na	Full Name	CITY CITY Tel ries: List all banks or other depositories in which the dintains funds.	ephone Number	s funds, holds accounts, rents
9. Ba saf Na	Full Name Mailing Address TITLE OR POSITION Inks or Other Depositor fety deposit boxes or main me of Bank, pository, etc.	CITY CITY Tel ries: List all banks or other depositories in which the dintains funds.	ephone Number	s funds, holds accounts, rents

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

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g) or (h).	Joint Fundraising	g 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
GR	OW THE MAJORI	Y 		
N	Mailing Address	228 S. Washington Street		
		Suite 115		
		Alexandria	VA	22314
F	Relationship:	CITY A	STATE A	ZIP CODE ▲
	nated Agent: Identify	by name, address (phone number – optional)		
Ful		by name, address (phone number – optional)		
Ful	II Name	by name, address (phone number – optional)		
Ful	II Name	by name, address (phone number – optional)		
Ful Ma	II Name	CITY A	STATE A	ZIP CODE A
Ful Ma	Il Name	CITY	STATE A	ZIP CODE A
Ful Ma	Il Name	CITY A Telepl ies: List all banks or other depositories in which the	none Number	
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FEC Form 1S (Revised 02/2017) for Lines 5(g) or (l

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

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			nber C	
		FEC ID num	nber C	
		FEC ID num	nber C	
Any Connected O	organization, Affiliated Committee, Jo	int Fundraising Represer	ntative, or Le	eadership PAC Spons
THE MAJORIT	Y NY			
na Address	228 S WASHINGTON ST STE 115		1 1 1 1	
g				
	ALEXANDRIA		'A 2	2314
tionship:	CITY A	STA	L L TE Δ	ZIP CODE ▲
				Leadership PAC Sp
ime				
Address				
OR POSITION \	CITY A	STATE	Ē ▲	ZIP CODE ▲
	THE MAJORIT THE M	THE MAJORITY NY 228 S WASHINGTON ST STE 115 ALEXANDRIA ionship: Connected Organization Affiliated Committee Agent: Identify by name, address (phone number – organization)	THE MAJORITY NY 228 S WASHINGTON ST STE 115 ALEXANDRIA Connected Organization Affiliated Committee Agent: Identify by name, address (phone number – optional) Maddress CITY A STATE	THE MAJORITY NY and Address 228 S WASHINGTON ST STE 115 ALEXANDRIA ionship: CITY A STATE A Address CITY A STATE A CITY A STATE A CITY A STATE A

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

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	C
3.		FEC ID number	С
4.		FEC ID number	C
		_	
Name of Any Connected	d Organization, Affiliated Committee, Joint Fu	ındraising Representativ	e, or Leadership PAC Spons
STEFANIK- ESPOS	ITO NY VICTORY		
	D.O. DOV 500		
Mailing Address	P.O. BOX 500		
	GLENS FALLS	NY NY	12801
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
Connect	fy by name, address (phone number – optional	Joint Fundraising Represent	
	fy by name, address (phone number – optional		
Designated Agent: Ident	fy by name, address (phone number – optional		
Designated Agent: Ident	fy by name, address (phone number – optional		
Designated Agent: Ident	fy by name, address (phone number – optional		
Designated Agent: Ident	CITY		ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	CITY		ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
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Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or necessity.	CITY ▲ cries: List all banks or other depositories in wh	STATE A Telephone Number	
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Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite to the safety deposite boxes or not be safety deposited.	CITY ▲ CITY ▲ Ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ts funds, holds accounts, rents
Pesignated Agent: Identification of Bank, Depository, etc.	CITY ▲ CITY ▲ ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ts funds, holds accounts, rents
Pesignated Agent: Identification of Bank, Depository, etc.	CITY ▲ CITY ▲ ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ts funds, holds accounts, rents

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

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

5(g) or	(h). Joint Fundraisi r	ng Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6. !	Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representativ	e. or Leadership PAC Sponsor
	OBERNOLTE VICTO			
	Mailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee X Jo	nt Fundraising Represent	ative Leadership PAC Sponsor
8. [Designated Agent: Identif	y by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			Telephone Number	
	safety deposit boxes or ma		h the committee deposit	ı
	Name of Bank, Depository, etc.	aintains funds.		ı
	safety deposit boxes or ma	aintains funds.		ı

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

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	C
lame of Any Connected	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
J. J			
Mailing Address	824 S MILLEDGE AVE		1 1 1 1 1 1 1 1 1 1
	STE 101		<u> </u>
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number - optional)		
esignated Agent: Identi	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 A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A CITY A pries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the position of the	CITY A CITY A pries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION	CITY A cries: List all banks or other depositories in which raintains funds.	elephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	CITY A cries: List all banks or other depositories in which raintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, pepository, etc.	CITY A cries: List all banks or other depositories in which raintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, pepository, etc.	CITY A cries: List all banks or other depositories in which raintains funds.	Telephone Number	s funds, holds accounts, rents