Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. North Carolina Democratic Party - Federal 220 Hillsborough Street ADDRESS (number and street) (Check if address is changed) Raleigh 27603 MN CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS compliance@ncdp.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.ncdp.org (Check if address is changed) DATE 2018 C00165688 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR 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. Tilghman, Anna, , , Type or Print Name of Treasurer Tilghman, Anna, , , [Electronically Filed] 08 2022 Signature of Treasurer Date 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)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	ation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign comminformation below.)	mittee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	State MN President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized co	ommittee.
Name of Candidate	
Party Committee:	
(d) This committee is a STA (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on I	line 6.) Its connected organization is a:
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a committee. (i.e., nonconnected committee)	separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line	6.)
(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 a	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 committees/organizations, at least one of which is an authorized committee of a fed	
(j) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal ca	
Committees Participating in Joint Fundraiser	
1.	С
	C

ı	FEC Form 1 (Revised 0)2/2009)		Page 3
V	Vrite or Type Committee Name North Carolina	Democratic Party - F	ederal	
6.		rganization, Affiliated Committee, Join		Leadership PAC Sponsor
	NC State Party Victo	'iy Fund 		
	Mailing Address	430 S. Capitol Street, SE		
		1		
		Washington	DC	20003
		CITY A	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization	Joint Fundraising Representative	e Leadership PAC Spons
7.	Custodian of Records: Ident books and records.	tify by name, address (phone number op	otional) and position of the person in	possession of committee
	Cuomo, Me	eredith, , ,		
	Full Name			
	Mailing Address	P.O. Box 1926		
		Raleigh	NC NC	27602
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Exec. Dir.		Telephone number 919	821 2777
8.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of assistant treasurer).	f the treasurer of the committee; ar	nd the name and address of
	Full Name Tilghman,	Anna, , ,		
	of Treasurer			
	Mailing Address	P.O. Box 1926		
		Raleigh	NC NC	27602
	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
	Treasurer		Telephone number	821 - 2777

FEC Form 1	I (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits functions or maintains funds.	ls, holds accounts, rents
Name of Bank, [Depository, etc.	
	North State Bank	
Mailing Address	6200 Falls of Neuse Road	
	Raleigh NC	27609
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, [Depository, etc.	
	Amalgamated Bank	
Mailing Address	275 Seventh Avenue	
	New York	10011
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Page ____ **of** _____ 18___

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
Dollars for Demo	_		,, , , _ , , , , , , , , , , , , , , ,
Mailing Address	430 S. Capitol Street, SE		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name		OTATE A	7ID CODE A
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or me	CITY A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY A CITY A pries: List all banks or other depositories in which aintains funds. of America	Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY A CITY A pries: List all banks or other depositories in which aintains funds. of America	Telephone Number	

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

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Democratic Gras	sroots Victory Fund		
Mailing Address	430 South Capitol Street, SE		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
salamated Agent, Identi			
Full Name	fy by name, address (phone number – optional)		1 1 1 1 1 1 1 1 1
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name		STATE A	7IP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A pries: List all banks or other depositories in which	Telephone Number	

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
BIDEN VICTORY	/ FUND		
	430 SOUTH CAPITOL STREET SE		
Mailing Address	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Representation	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

h). Joint Fundraisir	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
BATTLEGROUNI	O SOUTH		
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
	WASHINGTON	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
П.			
		t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee Join y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY Touries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposited afety deposit boxes or mail	y by name, address (phone number – optional) CITY Touries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY Touries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisir	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	611 PENNSYLVANIA AVENUE SE		
	SUITE 143		
	WASHINGTON	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee January Join y by name, address (phone number – optional)	nt Fundraising Representa	Leadership FAC 35
			Leadership FAC 3p
esignated Agent: Identif		I rundraising ricpresenta	Leadership PAC Sp
esignated Agent: Identif			Leadership FAC 3p
esignated Agent: Identif			Leadership FAC 3p
esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	ZIP CODE A
resignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
Full Name Mailing Address	y by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Deposite afety deposit boxes or malame of Bank, depository, etc.	y by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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
MANNING VICTO	Organization, Affiliated Committee, Joint Fun DRY FUND 2022	draising Representation	ve, or Leadership PAC Spon
Mailing Address	122 C ST NW		
	SUITE 360		
	WASHINGTON	DC	20001
Relationship:	CITY ▲	STATE A	ZIP CODE A
Connecte		int Fundraising Represen	tative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	int Fundraising Represen	tative Leadership PAC Sp
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	int Fundraising Represen	tative Leadership PAC Sp
esignated Agent: Identification	ed Organization Affiliated Committee	int Fundraising Represen	tative Leadership PAC Sp
esignated Agent: Identification	ed Organization Affiliated Committee	int Fundraising Represen	tative Leadership PAC Sp
esignated Agent: Identification	Affiliated Committee Affiliated Committee y Jo y by name, address (phone number – optional)	int Fundraising Represen	tative Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee Affiliated Committee y Journal fy by name, address (phone number – optional) CITY CITY		
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	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposited deposit boxes or mane of Bank,	Affiliated Committee	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee	STATE A Telephone Number	ZIP CODE A

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

1				
		FEC ID n		
2.		FEC ID n		
3		FEC ID n	umber C	
4.		FEC ID n	umber C	
	ed Organization, Affiliated Committee	= -	sentative, or Leader	ship PAC Sponsor
FRIENDS OF S	STATE DEMOCRATIC PART	IES		
Mailing Address	114 BEAUCHAMP LANE			
	LAFAYETTE		LA , 70506	
Relationship:	CITY ▲		TATE A	ZIP CODE ▲
	cted Organization Affiliated Commit			eadership PAC Sponso
Designated Agent: Ide	ntify by name address (phone number	– ontional)		
Designated Agent: Ide	ntify by name, address (phone number	- optional)		
	ntify by name, address (phone number	- optional)		
Full Name	ntify by name, address (phone number	- optional)		
Full Name	CITY		ATE A Z	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc. Mailing Address					
Name of Bank, Depository, etc.					
Name of Bank, Depository, etc.					
safety deposit boxes or ma					
		or other depositories in v	vnich the committee de	eposits funds,	noids accounts, rents
	who are like to all the set	on other demonstrative to	uhinh the committee of	annaite for a	holdo occasión in t
			Telephone Number		
TITLE OR POSITION	▼	CITY A	STATE	A	ZIP CODE ▲
Mailing Address					
Full Name					
Designated Agent: Identify	y by name, address	s (phone number – option	al)		
Connected	d Organization	Affiliated Committee	Joint Fundraising Repr	esentative	Leadership PAC Spo
Relationship:		CITY A	STA	TE 🛦	ZIP CODE ▲
	WASHINGTON		D	C 20	003
	NUM 143				
Mailing Address	611 PENNSYLV	/ANIA AVE SE			
Name of Any Connected JEFF JACKSON	_		Fundraising Represer	ntative, or Lea	adership PAC Sponso
4.			FEC ID num		
3.			FEC ID num		
_			FEC ID num		
2.			FEC ID num		

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
	Organization, Affiliated Committee, Joint Fu	ındraising Representativ	e, or Leadership PAC Spon
JEFF JACKSON	VICTORY FUND		
Mailing Address	611 PENNSYLVANIA AVE SE		
	NUM 143		
	WASHINGTON	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify	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		ZIP CODE A
Full Name Mailing Address	CITY		
Full Name Mailing Address TITLE OR POSITION	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito aftery deposit boxes or material depositions are as a second and the se	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depositions are of Bank,	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposit boxes or material depository, etc.	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	CITY A	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(g) or (h). Joint Fundrais i	ing Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fundr VICTORY FUND	aising Representative	e, or Leadership PAC Sponsor
Mailing Address	514 DANIELS ST SUITE 286		
	RALEIGH	NC	27605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint ify by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sponso
	··· , ·· · · · · · · · · · · · · · · ·		
Full Name			1
Full Name Mailing Address			
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A		
Mailing Address TITLE OR POSITION	CITY A City A tories: List all banks or other depositories in which	STATE ▲	ZIP CODE 🛦
Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not not boxes. Name of Bank, Depository, etc.	CITY A City A tories: List all banks or other depositories in which	STATE ▲	ZIP CODE 🛦
Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not not be safety. The safety deposit boxes or not be safety deposit boxes or not be safety.	CITY A City A tories: List all banks or other depositories in which	STATE ▲	ZIP CODE 🛦

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

	ng Participant:			
1.		FEC ID	number	C
2.		FEC ID	number	С
3.		FEC ID	number	C
4.		FEC ID	number	С
ame of Any Connected	d Organization, Affiliated Committee, Joi	nt Fundraising Rep	esentative	e, or Leadership PAC Spor
BEASLEY DEMIN	NGS VICTORY FUND			
Mailing Address	611 PENNSYLVANIA AVE SE			
	NUM 143		1 1 1	
	WASHINGTON	1	DC	20003
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	✗ Joint Fundraising	Represents	tive Leadership PAC S
Full Name				
Full Name				
	CITY A		TATE A	ZIP CODE A
Mailing Address	CITY A		TATE A	
Mailing Address TITLE OR POSITION	CITY ▲ ories: List all banks or other depositories	Telephone Nu	TATE mber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or m	CITY ▲ ories: List all banks or other depositories	Telephone Nu	TATE mber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank,	CITY ▲ ories: List all banks or other depositories	Telephone Nu	TATE mber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposite tety deposit boxes or mane of Bank,	CITY ▲ ories: List all banks or other depositories	Telephone Nu	TATE mber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲ ories: List all banks or other depositories	Telephone Nu	TATE mber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲ ories: List all banks or other depositories	Telephone Nu	TATE mber	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:	
	1.		FEC ID number C
	2		FEC ID number C
	3.		FEC ID number
	4.		FEC ID number C
6.	Name of Any Connected DON DAVIS VICT	_	draising Representative, or Leadership PAC Sponsor
	Mailing Address	514 DANIELS ST	
		#286	
		RALEIGH	NC 27605
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	nt Fundraising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)	
	Mailing Address	1	
	Maining / Nacioss		
		CITY _	STATE ▲ ZIP CODE ▲
	TITLE OR POSITION	•	
			Telephone Number
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.		n the committee deposits funds, holds accounts, rents
	Mailing Address		
	Š		
		CITY ▲	STATE ▲ ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

of tall information $\mathbf{6}$, $\mathbf{6}$, $\mathbf{8}$ and/or $\mathbf{9}$ Page $\frac{17}{2}$ of $\frac{18}{2}$

or(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	d Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
NC OH PA VICT	ORY FUND		
Mailing Address	600 PENNSYLVANIA AVE SE	1 1 1 1 1 1	
	#15180		
	WASHINGTON	DC	20003
Dolotionohina	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identi		Fundraising Represent	ative Leadership PAC Spons
Connecte Designated Agent: Identi	ed Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identi	ed Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identi	Affiliated Committee	Fundraising Represent	
Designated Agent: Identi	Affiliated Committee	Fundraising Represent	Leadership PAC Spons
Designated Agent: Identi Full Name Mailing Address	Affiliated Committee		
Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Joint I Ify by name, address (phone number – optional) CITY CITY Tele Ories: List all banks or other depositories in which the	STATE A ephone Number	ZIP CODE A
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 Joint I Ify by name, address (phone number – optional) CITY CITY Tele Ories: List all banks or other depositories in which the	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	C
3.		FEC ID number	С
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	draising Representativ	e, or Leadership PAC Spon
HASSAN BEASL	.EY VICTORY FUND		
	PO POY 45045		
Mailing Address	PO BOX 15845		
	C/O MBACG		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ed Organization Affiliated Committee	nt Fundraising Represent	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
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