Only

# STATEMENT OF

PAGE 1 / 23 -

FEC FORM 1		OR	GANI	IZATIO	ON						0	#ioo II	aa Onb			
NAME OF     COMMITTEE (in	full)		eck if name		mple:If ty		ре	1:	2FE	4M5		TICE U	se Only	<u>/</u>		
Mark Kelly			iangeu)	ove	i ille lilles	<b>.</b>										
IVIAIR IXEIIY	101 36	IIate														
ADDRESS (number a	nd street)	PO Box 272	02													
		Tucson							AZ       TATE		857	726	710	- L		
COMMITTEE'S E-MA	VII ADDDE		_					31	AIL	•			۷۱۲	COD		
(Check if a			mwcompli	iance.com	1											
is changed																
		Optional Se michael			.com											
COMMITTEE'S WEB	PAGE ADI	DRESS (URL)														
(Check if a is changed																
	,	1		1 1 1 1	1 1 1		ll			ı	1 1	ı				<sub>1</sub>
2. DATE 0	M / D 7		22													
3. FEC IDENTIFIC	CATION NU	JMBER ▶	С	C0069652	26											
4. IS THIS STATEM	MENT	NEW (N)	) OF	R X	AME	ENDED	(A)									
I certify that I have e	examined th	is Statement	and to the	best of my	knowledge	e and be	elief it	is tr	ue, c	orrec	t and	l com	plete.			
Type or Print Name	of Treasure	Montoya, Da	acey, , ,													
Signature of Treasure	er <i>Monto</i>	ya, Dacey, , ,			[Electronia	cally File	d]	Date	€	М -	M /	1	5	/ Y	2022	Y
NOTE: Submission of	false, errone	ous, or incomp ANY CHANG										pena	Ities o	i 52 U.	.S.C. {	}30109
Office Use					For further Federal El Toll Free 8	lection Co	mmissi		t:					<b>ORM</b> 06/201		

Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page	<b>2</b>
TYPE OF COMMITTEE:		
Candidate Committee:		
(a) This committee is a principal campaign com	mmittee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, information below.)	, and is NOT a principal campaign committee. (Complete the candidate	9
Name of Candidate Kelly, Mark, , ,		
Candidate Office Party Affiliation DEM Sought:	House Senate President District	AZ
(c) This committee supports/opposes only one of	candidate, and is NOT an authorized committee.	
Name of Candidate		
(d) This committee is a	onal, State (Democratic, Republican, etc.) Party	у
Political Action Committee (PAC):		
(e) This committee is a separate segregated fur	und. (Identify connected organization on line 6.) Its connected organization	tion is a
Corporation	Corporation w/o Capital Stock Labor Organization	1
Membership Organization	Trade Association Cooperative	ı
In addition, this committee is a Lo	obbyist/Registrant PAC.	
(f) This committee supports/opposes more than committee. (i.e., nonconnected committee)	n one Federal candidate, and is NOT a separate segregated fund or p	oarty
In addition, this committee is a Lo	obbyist/Registrant PAC.	
In addition, this committee is a Le	eadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditu	cure-only political committee (Super PAC).	
In addition, this committee is a Lo	obbyist/Registrant PAC.	
_	n both contribution and non-contribution accounts (Hybrid PAC).	
In addition, this committee is a Lo	· •	
in addition, this committee is a Lo	obbyist/negistrant FAC.	
Joint Fundraising Representative:		
(1)	fundraising expenses and disburses net proceeds for two or more politich is an authorized committee of a federal candidate.	itical
(1)	fundraising expenses and disburses net proceeds for two or more poli an authorized committee of a federal candidate.	itical
Committees Participating in Joint Fundraiser		
1.	С	

	FEC Form 1 (Revised 02	/2009)	Page <b>3</b>
V	rite or Type Committee Name	No. 10 10	
	Mark Kelly for S		
6.	Name of Any Connected Or Mark Kelly Victory Fu	ganization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
	Wark Relig Victory Fu		
	Mailing Address	3104 E Camelback Rd	
	Ç	#924	
		Phoenix AZ 85	5016
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identification books and records.	y by name, address (phone number optional) and position of the person in pos	ssession of committee
	Montoya, Da	CeV	
	Full Name		
	Mailing Address	PO Box 97241	
		Phoenix AZ 85	5060
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	- 228 - 8902
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the sistant treasurer).	he name and address of
	Full Name Montoya, Da	сеу, , ,	
	of Treasurer		
	Mailing Address	PO Box 97241	
		Phoenix AZ 85	5060
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		_ 228 8902

FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent	Sheridan, Michael, , ,		
Mailing Address	PO Box 97241		
	Phoenix	AZ 85060	
Title or Position <b>▼</b>		ΓΑΤΕ <b>Δ</b>	ZIP CODE ▲
Designated Agent	Telephone numbe	er 928 – <u> </u>	301 - 5514
	Depositories: List all banks or other depositories in which the committee cases or maintains funds.	deposits funds, hold	ds accounts, rents
Name of Bank, D	epository, etc.		
	Amalgamated Bank		
Mailing Address	1825 K Street NW		
	Washington	DC 20006	
	CITY ▲ ST	ATE A	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Woodsboro Bank		
Mailing Address	PO Box 36		
	Woodsboro	MD 21798	
	CITY ▲ ST	TATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Page \_\_\_\_\_ **of** \_\_\_\_\_\_23\_\_\_\_

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
Blue Senate Can	didate Fund		
Mailine Addus a	918 Pennsylvania Ave SE		
Mailing Address			
	Washington	DC	30003
51	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC S
Connecte	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC S
Connecte esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC S
Connecte		nt Fundraising Represent	ative Leadership PAC S
Connecte esignated Agent: Identif	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identification  Full Name  Mailing Address	fy by name, address (phone number – optional)		
Connecte esignated Agent: Identif	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identification  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
connected esignated Agent: Identification of the position of t	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connecte  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   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
connected esignated Agent: Identification of the position of t	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

h). <b>Joint Fundraisin</b>			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected Common Sense 2	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Mailing Address	910 17th Street, NW		
mailing /taa.ooo	Suite 925		
	Washington	DC	20006
Relationship:	CITY A	STATE A	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
Connected		t Fundraising Represent	Leadership PAC Sp
Connected esignated Agent: Identify	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee Joint	t Fundraising Representa	
esignated Agent: Identify  Full Name  Mailing Address	d Organization Affiliated Committee Joint	t Fundraising Representation	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	Affiliated Committee  y by name, address (phone number – optional)  CITY		
Esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or material deposition of Bank, epository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Te	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(g) or (	(h). <b>Joint Fundraising</b>	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
. N	lame of Any Connected C	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Secure Our Serial	= 2021 		
	Mailing Address	600 Pennsylvania Ave SE		
		#15180		
		Washington	DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponso
_			Tundraising Tropicsens	Leadership FAC Sponso
. D		by name, address (phone number – optional)	I i i i i i i i i i i i i i i i i i i	Leadership FAC Sponso
_ . D	esignated Agent: Identify		I i i i i i i i i i i i i i i i i i i	Leadership PAC Sponso
_ . D	esignated Agent: Identify  Full Name		I undraising Trepresent	Leadership FAC Sponso
_ . D	esignated Agent: Identify  Full Name			Leadership FAC Sponso
_ . D	esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
_ . D	esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)  CITY		
 . <b>B</b> sa	esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositorialety deposit boxes or main  ame of Bank,	by name, address (phone number – optional)  CITY   Teleses: List all banks or other depositories in which telesisted in the second content of the second c	STATE A	ZIP CODE A
 . <b>B</b> sa	esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION To a control of the control of	by name, address (phone number – optional)  CITY   Teleses: List all banks or other depositories in which telesisted in the second content of the second c	STATE A	ZIP CODE A
 . <b>B</b> . sa	esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositorialety deposit boxes or main  ame of Bank,	by name, address (phone number – optional)  CITY   Teleses: List all banks or other depositories in which telesisted in the second content of the second c	STATE A	ZIP CODE A
 . <b>B</b> . sa	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositoriafety deposit boxes or main ame of Bank, repository, etc.	by name, address (phone number – optional)  CITY   Teleses: List all banks or other depositories in which telesisted in the second content of the second c	STATE A	ZIP CODE A
 . <b>B</b> . sa	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositoriafety deposit boxes or main ame of Bank, repository, etc.	by name, address (phone number – optional)  CITY   Teleses: List all banks or other depositories in which telesisted in the second content of the second c	STATE A	ZIP CODE A

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

n). <b>Joint Fundraising</b>				
1.			FEC ID number	C
2.			FEC ID number	С
3			FEC ID number	C
4.			FEC ID number	C
	Organization, Affiliated Committe	ee, Joint Fundrai	sing Representative	e, or Leadership PAC Spor
Georgia Arizona V	ctory Fund			
Mailing Address	611 Pennsylvania Ave SE			
	Ste 143			
	Washington		DC	20003
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Organization Affiliated Comm	ittee 🗶 Joint F	undraising Representa	ative Leadership PAC S
Connected esignated Agent: Identify			undraising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Comm		undraising Representa	Leadership PAC S
Connected esignated Agent: Identify	Organization Affiliated Comm		undraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Comm	er — optional)		
Connected esignated Agent: Identify Full Name	Organization Affiliated Comm by name, address (phone number	er — optional)		Leadership PAC S
connected esignated Agent: Identify Full Name Mailing Address	Organization Affiliated Comm by name, address (phone number	er — optional)		
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	Organization Affiliated Comm by name, address (phone number  CITY   CITY   es: List all banks or other depos	er – optional)	STATE A	ZIP CODE A
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail	Organization Affiliated Comm by name, address (phone number  CITY   CITY   es: List all banks or other depos	er – optional)	STATE A	ZIP CODE A
connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	Organization Affiliated Comm by name, address (phone number  CITY   CITY   es: List all banks or other depos	er – optional)	STATE A	ZIP CODE A

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5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
(0)	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 Arizona Nevada 2	Organization, Affiliated Committee, Joint Fundra 022 Victory Fund	ising Representative	, or Leadership PAC Sponsor
	Mailing Address	3104 E Camelback Rd		
		#924		
		Phoenix	AZ	85016
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint I	Fundraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number - optional)		
3.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
3.		by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	CITY	STATE A	ZIP CODE A
3.	Full Name	CITY A		
3.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A  Tele  ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
3.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main	CITY A  Tele  ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
3.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A  Tele  ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
3.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY A  Tele  ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
3.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY A  Tele  ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

g) or (h). <b>Joint Fundraisi</b> r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
7.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fundament	draising Representative	e, or Leadership PAC Sponsor
DSCC Battlegrou	nd Victory 2022		
	. 120 Mandand Ava NE		
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sponsor
	y by name, address (phone number - optional)		
Full Name			
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in whic aintains funds.	n the committee deposit	s funds, holds accounts, rents
Name of Bank, Depository, etc.			
Mailing Address			
	CITY A	STATE ▲	ZIP CODE ▲

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

h). <b>Joint Fundrais</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected Serve America V	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO Box 2013		
Mailing Address			
	Salem		01970
Relationship:			
Helationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee    Join  ify by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)	STATE	
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)  CITY		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of the position	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b> r		FEC ID number	С
		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4			O
	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
Gillibrand Kelly Vi	ctory Fund		1 1 1 1 1 1 1 1 1
Mailing Address	124 Washington St		
. J	Suite 101		
	Foxboro	MA	02035
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint	t Fundraising Representa	Leadership PAC S
	Affiliated Committee  Joint  y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
Full Name Mailing Address	y by name, address (phone number – optional)  CITY	STATE A	ZIP CODE A
Full Name Mailing Address	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor detects after deposit boxes or mails are of Bank,	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor dety deposit boxes or material depository, etc	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor dety deposit boxes or material depository, etc	y by name, address (phone number – optional)  CITY   Terries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

n). <b>Joint Fundraising</b>			1	FF0 15			
1.				FEC ID		C	
2.				FEC ID		C	
3.				FEC ID	number	С	
4.				FEC ID	number	C	
ame of Any Connected (			Joint Fundra	aising Repr	esentative	e, or Leadershi	p PAC Spor
Arizona Colorado	2022 Victory Fu	und 					
Mailing Address	3104 E Camelback	Rd					
	#924						
	Phoenix				AZ	85016	
Relationship:		CITY A			STATE A	ZII	P CODE A
	Organization A	ffiliated Committe	e X Joint	Fundraising	Representa	Lead Lead	ership PAC S
				Fundraising	Representa	ative Lead	ership PAC S
Connected esignated Agent: Identify				Fundraising	Representa	ative Lead	ership PAC S
Connected esignated Agent: Identify Full Name				Fundraising	Representa	ative Lead	ership PAC S
Connected esignated Agent: Identify Full Name		phone number -	- optional)		Representa		
connected esignated Agent: Identify Full Name Mailing Address	by name, address (	phone number -	- optional)		Representa		ership PAC S
Connected esignated Agent: Identify Full Name	by name, address (	phone number -	- optional)		TATE A		
connected esignated Agent: Identify Full Name Mailing Address	by name, address (	phone number -	- optional)	S lephone Nu	TATE A	ZIP	CODE A
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail	by name, address (	phone number -	- optional)	S lephone Nu	TATE A	ZIP	CODE A
connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, address (	phone number -	- optional)	S lephone Nu	TATE A	ZIP	CODE A

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

h). <b>Joint Fundraisi</b> r	g Farticipant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Granite Canyon C	;ommittee 		
	<sub>I</sub> 600 Pennsylvania Ave SE		
Mailing Address			
	#15180		
	Washingon	DC DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
	Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions.	y by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions.	y by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for

h). <b>Joint Fundraisi</b>	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
Arizona Illinois Se	enate Victory Fund		
Mailing Address	124 Washington St		
	Ste 101		
	Foxboro	MA	02035
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Join  y by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)  CITY		
esignated 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 which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	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	C
=	Organization, Affiliated Committee, Joint	Fundraising Representati	ve, or Leadership PAC Sponse
Ohio Arizona Vic	tory Fund		
Mailing Address	401 2nd Ave S		
	Ste 303		
	Seattle	WA	98104
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Joint Fundraising Represer	tative Leadership PAC Spo
Full Name			
Mailing Address			
Mailing Address			
	CITY A	STATE A	ZIP CODE A
Mailing Address  TITLE OR POSITION	CITY A		
TITLE OR POSITION	ories: List all banks or other depositories in	STATE ▲ Telephone Number	ZIP CODE 🛦
TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in	STATE ▲ Telephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraising</b>	Participant:			
	1.		FEC ID nur	mber C	
	2.		FEC ID nur	mber C	
	3.		FEC ID nur	mber C	
	4		FEC ID nur	mber C	
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fund	draising Represe	entative, or Lea	adership PAC Sponsor
	Mailing Address	122 C Street NW			
		Suite 360			
		Washington		DC	001
	Relationship:	CITY ▲	STA	ATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	nt Fundraising Rep	presentative	Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)			
	Mailing Address				
		CITY A	STAT		ZIP CODE ▲
	TITLE OR POSITION				1 1 1
			Telephone Numbe	er [ ] =	
9.	safety deposit boxes or main Name of Bank,	es: List all banks or other depositories in which ntains funds.	n the committee o	deposits funds,	holds accounts, rents
	Depository, etc.				
	Mailing Address				
		CITY ▲	STAT	ΈΔ	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

n). <b>Joint Fundraisin</b> ç				1		. ID '	er C	·	
1.						C ID numb			
2.						C ID numb			
3.					FEC	C ID numb	er C		
4.					FEC	C ID numb	er C		
ame of Any Connected (		ffiliated Com	ımittee, Jo	oint Fund	Iraising	Representa	ntive, o	r Leadershi <sub>l</sub>	o PAC Spoi
Arizona Senate Vi	ctory 2022								
Mailing Address	120 Maryland	Ave NE							
								1 1 1	
	Washington	1 1 1 1	1 1 1 1	1 1 1	1 1	DC		20002	-
Relationship:		CIT	Y 🛦			STATE		ZIF	CODE A
	Organization	Affiliated C	ommittee	<b>X</b> Join	nt Fundra	ising Repres	entative	Leade	ership PAC S
Connected esignated Agent: Identify				_	nt Fundra	ising Repres	entative	Leade	ership PAC S
Connected esignated Agent: Identify Full Name				_	nt Fundra	ising Repres	entative	Leade	ership PAC S
Connected esignated Agent: Identify				_	nt Fundra	ising Repres	entative	Leade	ership PAC S
Connected esignated Agent: Identify Full Name				_	it Fundra	ising Repres	entative	Leade	ership PAC S
Connected esignated Agent: Identify Full Name	by name, addre	ess (phone no	umber – op	ptional)					
Connected esignated Agent: Identify Full Name	by name, addre	ss (phone no	umber – op	ptional)		STATE A			
connected esignated Agent: Identify Full Name Mailing Address	by name, addre	ess (phone no	umber – op	ptional)					
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	by name, addre	city	umber – op	otional)	-	STATE A		ZIP	CODE A
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  enks or Other Depositor fety deposit boxes or mail	by name, addre	city	umber – op	otional)	-	STATE A		ZIP	CODE A
connected esignated Agent: Identify Full Name Mailing Address	by name, addre	city	umber – op	otional)	-	STATE A		ZIP	CODE A
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, addre	city	umber – op	otional)	-	STATE A		ZIP	CODE A

FEC Form 1S (Revised 02/2017)

n). <b>Joint Fundraising</b>			1	FEC ID	numbor	C	
1.							
2.				FEC ID		С	
3.				FEC ID	number	C	
4.				FEC ID	number	C	
ame of Any Connected (		ated Committee	, Joint Fundr	aising Repr	esentative	e, or Leaders	hip PAC Spor
AZ NH NV OH Vic	tory Fund						
Mailing Address	401 2nd Ave S						
	Ste 303						
	Seattle			ı ı I	WA	98104	-
Relationship:		CITY ▲			STATE A		ZIP CODE A
	Organization A	Affiliated Committee	ee X Joint	Fundraising	Representa	ative Le	adership PAC S
		Affiliated Committe		Fundraising	Representa	ative Le	adership PAC S
Connected esignated Agent: Identify		Affiliated Committe		Fundraising	Representa	ative Le	adership PAC S
Connected esignated Agent: Identify Full Name		Affiliated Committe		Fundraising	Representa	ative Le	adership PAC S
Connected esignated Agent: Identify Full Name	by name, address	Affiliated Committe	- optional)		Representa		adership PAC S
Connected esignated Agent: Identify Full Name	by name, address	Affiliated Committee	- optional)		Representa		
Connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address	Affiliated Committee	- optional)		TATE A		
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail	by name, address	Affiliated Committee (phone number	- optional)	Selephone Nu	TATE A	ZI	P CODE A
Connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address	Affiliated Committee (phone number	- optional)	Selephone Nu	TATE A	ZI	P CODE A
Esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Tanks or Other Depositor  Ifety deposit boxes or mail  Image: Agent ag	by name, address	Affiliated Committee (phone number	- optional)	Selephone Nu	TATE A	ZI	P CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Faiticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
Beasley Kelly Vid	xory Fund		
	<sub> </sub> PO BOX 15845		
Mailing Address			
			00000
	Washington	DC DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	ative Leadership PAC S
	Affiliated Committee	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the state of Bank,	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the state of Bank,	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

h). <b>Joint Fundraisi</b> r	ig i artioipant.		0
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Expand the Major	ity Victory Fund		
	600 Pennsylvania Ave SE		
Mailing Address			
	Unit 15180		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee Join Join y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank,	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected 314 Action Impact	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	122 C St NW		
	Ste 360		1 1 1 1 1 1 1 1
	Washington	DC	20001
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joint Department of	int Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify  Full Name			Leadership PAC Sp
esignated Agent: Identify		III Tundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identify  Full Name			Leadership PAC Sp
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)  CITY		
Full NameMailing Address  TITLE OR POSITION	ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name	ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

(h). <b>Joint Fundraisin</b>	g Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Funed Senate Defense Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	122 C Street NW		
	Ste 360		
	Washington	DC	20001
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joint by name, address (phone number – optional)	int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify  Full Name		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify  Full Name		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Sp
resignated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)  CITY		
Full Name   Mailing Address	by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name	by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A