(Revised 06/2012)

FEC

Only

STATEMENT OF

PAGE 1 / 199 ·

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. NRCC 320 FIRST STREET SE ADDRESS (number and street) (Check if address is changed) WASHINGTON DC 20003 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS kdavis@hdafec.com (Check if address is changed) Optional Second E-Mail Address kwilliams@nrcc.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address www.nrcc.ora is changed) DATE 09 20 2022 C00075820 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. Davis, Keith A., , , Type or Print Name of Treasurer Davis, Keith A., , , [Electronically Filed] 09 20 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

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.)	nittee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	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 NAT (National, State or subordinate) committee of the REP	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on I	ine 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 _ , , , , , , , , , , , , , , , , , ,	C
	C

•	FEC Form 1 (Revised 0)	2/2009)	Page 3
٧	Irite or Type Committee Name		
	NRCC		
6.	=	ganization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
	COLE COMBINED C	OMMITTEE	
	Mailing Address	12176 CHANCERY STATION CIRCLE	
		1	
		RESTON VA 2	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 po	ossession of committee
	Davis, Keith	Δ	
	Full Name	^·, , ,	
	Marie Adding	320 First Street SE	
	Mailing Address		
		Washington DC 2	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	OHT E	211 0002 -
	Treasurer	Telephone number	_ 429 7000
3.	Treasurer: List the name and any designated agent (e.g., a	l address (phone number optional) of the treasurer of the committee; and ssistant treasurer).	the name and address of
	Full Name Davis, Keith	A., , ,	
	of Treasurer		
	Mailing Address	320 First Street SE	
		1	
		Washington DC 2	20003
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
		. 202	429 7000
	Treasurer	Telephone number	429

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent	Williams, Katy, , ,	
Mailing Address	320 First Street SE	
	Washington DC 2000	03
	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position	7	
Assistant Treasur	Ter Telephone number 202 -	429 - 7000
	Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.	olds accounts, rents
Name of Bank, D	pepository, etc.	
	Wells Fargo	
Mailing Address	1753 Pinnacle Drive	
	McLean VA 2210	2
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.	
	Country Club Bank	
Mailing Address	P.O. Box 410889	
	Kansas City MO 6414	<u> </u>
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ig Faiticipalit.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
SOUTH JERSEY	FIRST 		
Mailine Adduses	C/O RED CURVE SOLUTIONS		
Mailing Address	138 CONANT STREET 2ND FLOOR		
	BEVERLY	NA A	1 01915
5.1		MA MA	
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join Y Join Y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC S
		t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		t Fundraising Represent	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif	by by name, address (phone number – optional)	st Fundraising Representation	
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	by by name, address (phone number – optional) CITY T	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	cy 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 anks or Other Deposite afety deposit boxes or m ame of Bank, Bank	cy 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 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	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	cy by name, address (phone number – optional) CITY CITY CITY Tories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY CITY Tories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundraisir	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 BANKS VICTOR	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
Full Name			
Mailing Address			
	I		
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE A
TITLE OR POSITION	CITY ▲		
9. Banks or Other Deposito safety deposit boxes or many Name of Bank, First M	CITY Tele Treis: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
9. Banks or Other Depositor safety deposit boxes or ma	CITY Tele pries: List all banks or other depositories in which the aintains funds. Merit Bank	STATE ▲	ZIP CODE A
9. Banks or Other Deposito safety deposit boxes or many Name of Bank, First M	CITY Tele pries: List all banks or other depositories in which the aintains funds.	STATE ▲	ZIP CODE A
9. Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	CITY Tele pries: List all banks or other depositories in which the aintains funds. Merit Bank	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). Joint Fundraisin	g Participant:		
	1.	 	FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative, or Le	adership PAC Sponsor
	JACOBS VICTOR	RY COMMITTEE		
		OCC O WACHINGTON OTDEET		
	Mailing Address	228 S WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA	2314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representative	Leadership PAC Sponsor
8.	Designated Agent: Identify	, by name address (phone number optional)		
	Doorginated Agenti raemany	by name, address (phone number – optional)		
	Full Name	by hame, address (phone humber – optional)		
		by hame, address (phone humber – optional)		
	Full Name	by hame, address (phone humber – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	CITY	STATE A	ZIP CODE A
	Full Name	CITY A	STATE ▲	ZIP CODE A
	Full Name	CITY A		ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION	CITY A	STATE ▲ lephone Number	- [
	Full Name Mailing Address TITLE OR POSITION	CITY A Te ries: List all banks or other depositories in which	STATE ▲ lephone Number	- [
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY A Te ries: List all banks or other depositories in which	STATE ▲ lephone Number	- [
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Bank of	CITY CITY Tes: List all banks or other depositories in which intains funds.	STATE ▲ lephone Number	- [
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Te ries: List all banks or other depositories in which intains funds. of Nevada	STATE ▲ lephone Number	- [
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Te ries: List all banks or other depositories in which intains funds. of Nevada	STATE ▲ lephone Number	holds accounts, rents

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	nising Representative,	or Leadership PAC Sponsor
	PARNELL VICTO			
	Mailing Address	PO BOX 1488		
		CRANBERRY TOWNSHIP	PA PA	16066
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representat	ive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tel	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which t intains funds.	he committee deposits	funds, holds accounts, rents
	Name of Book PMOL	Jarria Bank NA		
	Name of Bank, Depository, etc.	larris Bank NA		
		Harris Bank NA 1 West Main Street		
	Depository, etc.	1 West Main Street		
	Depository, etc.		WI WI	53703

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1. 2. 3. 4. 4. Name of Any Connected of FORT VICTORY FORT	_		F	EC ID number	C C C	nip PAC Sponso	,r
3. 4. Name of Any Connected of FORT VICTORY	Organization, Affiliated UND 332 W LEE HWY #303		F	EC ID number	C	nip PAC Sponso	or
A. Name of Any Connected of FORT VICTORY F Mailing Address Relationship:	Organization, Affiliated UND 332 W LEE HWY #303		F	EC ID number	С	hip PAC Sponso	»r
A. Name of Any Connected of FORT VICTORY F Mailing Address Relationship:	Organization, Affiliated UND 332 W LEE HWY #303					hip PAC Sponso	»r
FORT VICTORY F	332 W LEE HWY #303	d Committee, Join	nt Fundraisin	ng Representative	e, or Leadersi	hip PAC Sponso	or
FORT VICTORY F	332 W LEE HWY #303	d Committee, Join	nt Fundraisin	ng Representative	e, or Leadersi	hip PAC Sponsc	or
Mailing Address Relationship:	332 W LEE HWY #303						
Relationship:	#303						
Relationship:	#303						
Relationship:							. 1
	WARRENTON						
				ı VA ı	20186		Ш
		CITY A					Ш
Connected	П	ated Committee		STATE ▲ draising Representa		ZIP CODE A adership PAC Spor	
Designated Agent: Identify Full Name	by name, address (phe	one number – opt	ional)				
Mailing Address	1						
					1	. _	
		CITY A		STATE ▲	ZIF	CODE ▲	
TITLE OR POSITION	•	1	Talamb	1	1–1 .	. -	, !
			reiepn	one Number			

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S. MILLEDGE AVENUE		
		SUITE 101		
		ATHENS	GA GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	undraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name		CTATE A	7ID CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY CITY Telep ies: List all banks or other depositories in which the	STATE ▲	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY CITY Telepties: List all banks or other depositories in which the intains funds.	STATE ▲	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Telepties: List all banks or other depositories in which the intains funds. rity Bank	STATE ▲	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Telepties: List all banks or other depositories in which the intains funds. rity Bank	STATE ▲	

FEC Form 1S (Revised 02/2017)

Mailing Address				
Full Name				
	Organization Affiliated Comby name, address (phone num		undraising Representa	tive Leadership PAC Spons
Relationship:	CITY	A	STATE ▲	ZIP CODE ▲
	JACKSON			49204
Mailing Address	PO BOX 1362			
WALBERG VICTO		Intee, Joint Fundrais	sing Representative	e, or Leadersnip PAC Sponsoi
	Organization, Affiliated Comm	ittee Joint Fundrai	sing Representative	or Leadershin PAC Sponso
4.			FEC ID number	С
2.			FEC ID number	C
1			FEC ID number	C

FEC Form 1S (Revised 02/2017)

Mailing Address TITLE OR POSITION anks or Other Depositor Deposi	ories: List all banlaintains funds.	ks or other depositories in whic	STATE A Telephone Number	ZIP CODE ZIP CODE ts funds, holds accounts, rents
anks or Other Depositorafety deposit boxes or material ame of Bank, epository, etc.	ories: List all banlaintains funds. t Bank	CITY A	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION anks or Other Depositor afety deposit boxes or material and the second sec	ories: List all banlaintains funds. t Bank	CITY A	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION	ories: List all ban	CITY A	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION	▼	CITY A	STATE A Telephone Number	ZIP CODE A
		CITY A	STATE ▲	
Mailing Address				
Mailing Address				
Mailing Address				
Full Name	y by name, addre	ess (phone number – optional)		
	d Organization		int Fundraising Represent	ative Leadership PAC Sp
Relationship:		CITY ▲	STATE ▲	ZIP CODE ▲
	ATHENS		GA GA	30605
	SUITE 101			
Mailing Address		DGE AVENUE		
	00.1.0	DOE AVENUE		
<u> </u>				
ame of Any Connected		ffiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
4.				
			FEC ID number	C
3.			FEC ID number	C
3.		1	FEC ID number	C
1				

FEC Form 1S (Revised 02/2017)

	g Participant:			
1.		FE	EC ID number	С
2		FE	EC ID number	С
3.		FE FE	EC ID number	С
4.		FE	EC ID number	C
=	Organization, Affiliated Committee,	Joint Fundraising	Representative	e, or Leadership PAC Sponso
KATKO VICTORY				
Mailing Address	228 S. WASHINGTON STREET			
	SUITE 115			
	ALEXANDRIA		VA	22314
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connected	I Organization Affiliated Committee	Joint Fundr	aising Representa	ative Leadership PAC Spor
	by name, address (phone number -	•		
Full Name	1			
Full Name Mailing Address				
<u></u>				
Mailing Address	CITY A		STATE A	ZIP CODE A
<u></u>	CITY A	Telepho		ZIP CODE A
Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail	ries: List all banks or other depositor		STATE ▲ ne Number	
Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail boxes or mail between the company of	ries: List all banks or other depositor intains funds. n Synergy Bank		STATE ▲ ne Number	

FEC Form 1S (Revised 02/2017)

(g) or (h).	Joint Fundraising	յ Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	С
4. [FEC ID number	C
	-	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
N	Mailing Address	47 FLINTLOCK DRIVE		
		SHIRLEY	NY	11967
F	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	ative Leadership PAC Sponsor
_		by name, address (phone number - optional)		
Ful	II Name			
Ма	iling Address			
		CITY ▲	STATE A	ZIP CODE A
Tľ	TLE OR POSITION	•		1 1 1 1
		Tele	ephone Number	
safety	or Other Depositor deposit boxes or mai of Bank, Eagle E		e committee deposit	s funds, holds accounts, rents
Deposit	tory, etc.			
	Mailing Address	277 S. Washington Street		
		Alexandria	VA	22314

FEC Form 1S (Revised 02/2017)

g) or (h).	Joint Fundraising	Participant:				
1.				FEC	ID number	C
2.			<u> </u>	FEC	ID number	C
3.	I , , , , , ,		1 1 1 1 1 1	 , FEC	ID number	C
4.				FEC	ID number	C
	of Any Connected C	=	ed Committee, Joint	Fundraising F	Representative	e, or Leadership PAC Sponsor
N	Mailing Address	P.O. Box 2485				
		Springfield		- 	VA	22152
F	Relationship:		CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Af	filiated Committee	Loint Fundrais	ing Representa	ative Leadership PAC Sponso
 Desigr	nated Agent: Identify	by name, address (p	phone number – option		3	
	nated Agent: Identify	by name, address (p				
Ful		by name, address (p				
Ful	III Name	by name, address (p				
Ful	III Name			nal)		
Ful Ma	all Name		phone number – option	nal)		
Ful Ma	III Name		phone number – option	nal)	STATE A	
Ful Ma	ailing Address ITLE OR POSITION or Other Depositorideposit boxes or main	ies: List all banks or ntains funds. cal Bank 333 E. Main Street	ohone number – option	nal) Telephone	STATE A Number	ZIP CODE s funds, holds accounts, rents
Ful Ma	ailing Address ITLE OR POSITION or Other Depositori deposit boxes or main of Bank, itory, etc.	ies: List all banks or ntains funds.	ohone number – option	nal) Telephone	STATE A Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

h). Joint Fundraisi i	I	FEC ID number	С
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
ROUZER CONG	RESSIONAL TRUST		
Mailing Address	P.O. Box 701		
	Clayton	NC	27528
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, First F	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which a aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, First F	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
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 Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) or (h	n). Joint Fundraisin	g Participant:				
	1.			FEC	ID number	C
	2.			FEC	ID number	C
	3.			FEC	ID number	C
	4.			FEC	ID number	C
	ame of Any Connected	Organization, Affiliat	ed Committee, Joint	Fundraising R	epresentativo	e, or Leadership PAC Sponsor
	RODNEY DAVIS	=			· 	· · · · · · · · · · · · · · · · · · ·
	Mailing Address	P.O. Box 9891				
		Arlington			VA L	22219
	Relationship:		CITY A		STATE ▲	ZIP CODE ▲
	Connected	Organization Aff	filiated Committee	Joint Fundraisi	ng Representa	ative Leadership PAC Sponsor
. De	esignated Agent: Identify	by name, address (p	phone number – optio	nal)		
	Mailing Address					
	TITLE OR POSITION	▼	CITY A		STATE ▲	ZIP CODE ▲
				Telephone	Number	
sa Na	anks or Other Depositor Ifety deposit boxes or ma ame of Bank, epository, etc. Mailing Address	intains funds.		which the comm	UT	s funds, holds accounts, rents
			CITY A		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:	
	1.		FEC ID number
	2.		FEC ID number C
	3		FEC ID number
	4.		FEC ID number
6.	Name of Any Connected	_	aising Representative, or Leadership PAC Sponsor
	Mailing Address	2345 GRAND BLVD SUITE 2400	
		KANSAS CITY	MO 64108
	Relationship:	CITY 🛦	STATE ▲ ZIP CODE ▲
	Connected	Affiliated Committee X Joint	Fundraising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)	
	Full Name		
	Mailing Address		
	TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE ▲
			elephone Number
9.	Name of Bank, Flagsta	intains funds.	the committee deposits funds, holds accounts, rents
	Depository, etc.	₁ 1801 W. Grand River	
	Mailing Address		
		Okemos	MI 48864 — — — — — — — — — — — — — — — — — — —
		CITY A	STATE ▲ ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.	F	FEC ID number	C
	3.	F	FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraisir	ng Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S. MILLEDGE AVENUE		
		SUITE 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	ndraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	Mailing Address			
	Mailing Address			
		CITY A	STATE A	ZIP CODE A
	Mailing Address TITLE OR POSITION	•		ZIP CODE A
	TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching the safe	ries: List all banks or other depositories in which the clintains funds.	STATE ▲	
	TITLE OR POSITION Banks or Other Depositors safety deposit boxes or ma	ries: List all banks or other depositories in which the dintains funds.	STATE ▲	
	TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching the safe	ries: List all banks or other depositories in which the clintains funds.	STATE ▲	
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5(g) c	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 Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint Fo	undraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	•		ZIP CODE A
	Banks or Other Depositor safety deposit boxes or ma	Tele	STATE ▲ phone Number	
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	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the aintains funds. ational Bank of Tennessee	STATE ▲ phone Number	
	Banks or Other Depositor safety deposit boxes or matching the safety deposit boxes or matching the safety depository, etc.	ries: List all banks or other depositories in which the aintains funds. ational Bank of Tennessee	STATE ▲ phone Number	

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

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(h). Joint Fundraisi			
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected TEAM LAHOOD	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joi	nt Fundraising Representa	ative Leadership PAC Spo
		nt Fundraising Representa	ative Leadership PAC Spo
Designated Agent: Identi		nt Fundraising Representa	ative Leadership PAC Spo
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Pesignated Agent: Identi Full Name	fy by name, address (phone number – optional) CITY CITY CITY Ories: List all banks or other depositories in whice aintains funds. Gulf Bank 900 Town & Country Lane	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Pasignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION CITY STATE ZIP CODE Telephone Number	h). Joint Fundraisi	ng Participant:		
3	1.		FEC ID number	С
A. FEC ID number C ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spo ANDY BARR VICTORY COMMITTEE Mailing Address 332 WLEE HWY #303 WARRENTON Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC segments of the committee Accordance Telephone Number TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Title OR POSITION ▼ Telephone Number Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Title OR POSITION ▼ Telephone Numbe	2.		FEC ID number	C
ame of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Spo ANDY BARR VICTORY COMMITTEE Mailing Address 332 W LEE HWY #303 WARRENTON Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundralsing Representative Leadership PAC Spo ANDY Fundralsing Representative, or Leadership PAC Spo ANDY Fundralsing Representative,	3.		FEC ID number	С
Mailing Address Mailing Address 332 W LEE HWY	4		FEC ID number	С
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Mailing Address WARRENTON WARRENTON WARRENTON WARRENTON CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization				
Relationship: CITY A STATE A ZIP CODE A Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC s 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 Telephosit boxes or maintains funds. ame of Bank, apository, etc. Mailing Address 1817 West End Avenue	Mailing Address	#303		
Connected Organization		WARRENTON	L VA	20186
Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TiTLE OR POSITION ▼ CITY ▲ Telephone Number				ZIP CODE ▲
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number	Connecte	ed Organization Affiliated Committee		
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TITLE OR POSITION CITY Telephone Number Tel	esignated Agent: Identi	ed Organization Affiliated Committee		
Telephone Number Telephone Nu	esignated Agent: Identi	ed Organization Affiliated Committee		
Telephone Number Telephone Nu	Connecte esignated Agent: Identi	Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Representa	
ame of Bank, First Bank epository, etc. Mailing Address [1817 West End Avenue]	esignated Agent: Identi Full Name Mailing Address	Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
Mailing Address	esignated Agent: Identi Full Name Mailing Address	Affiliated Committee	Fundraising Representation	Leadership PAC S
Nashville TN 37203	connected Esignated Agent: Identification of Sanks or Other Deposition of Bank, First Estate Connected	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which in aintains funds. Bank	Fundraising Representation	Leadership PAC S
Nasnville TN 37203	esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which in aintains funds. Bank	Fundraising Representation	Leadership PAC S
	esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee Affiliated Committee Figure 1	STATE slephone Number the committee deposit	Leadership PAC S

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi			
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4.		FEC ID number	C
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ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
WILSON LEADE	RSHIP FUND		
I			
Mailing Address	PO BOX 2456		
	SPRINGFIELD	, , , , , VA ,	22152
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC S
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esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
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FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisi n	g Participant:			
	1		FEC II	D number	C
	2		FEC II	D number	C
	3.		FEC II	D number	C
	4.		FEC II	D number	С
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Re	presentativ	e, or Leadership PAC Sponsor
	Mailing Address	1915 SOUTH WEBSTER AVE			
		STE D			
		GREEN BAY		WI	54301
	Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	nt Fundraisin	g Representa	ative Leadership PAC Sponsor
8.	Pull Name	by name, address (phone number – optional)			
	Mailing Address				
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	TITLE OR POSITION	▼ CITY ▲		STATE A	ZIP CODE ▲
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	Mailing Address				
		Fresno		CA I	93711
_		CITY A		STATE A	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

h). Joint Fundraisi r	g Participant:				
1.			FEC ID nu	mber	С
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3.		1	FEC ID nu	mber	С
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ame of Any Connected	Organization, Affiliated C	Committee, Joint Fun	draising Repres	entative,	, or Leadership PAC Spon
STRONG AMERI	CA FUND				
Mailing Address	824 S MILLEDGE AVE,	STE 101			
	ATHENS			GA	30605
Relationship:		CITY A	ST	ATE 🛦	ZIP CODE ▲
esignated Agent: Identif	d Organization Affiliate y by name, address (phone		int Fundraising Re	oresentat	tive Leadership PAC S
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	y by name, address (phonormal prices: List all banks or other aintains funds.	e number – optional)	STAT Telephone Numb	TE A	ZIP CODE A

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Relationship:	CITY A			STATE ⊿	TE ▲	ZIP CODE ▲
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(h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
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	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
PALMER VICTO	RY COMMITTEE		
Marilia a Aulaba a	1919 OXMOOR ROAD		
Mailing Address	#223		
			25200
	HOMEWOOD	AL	35209
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	Affiliated Committee Joint Joint by pame, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
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FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundrais	sing 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 Connecte	ed Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	824 S. MILLEDGE AVENUE SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sponsor
8. Designated Agent: Iden	tify by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITIO	N ▼ CITY ▲	STATE ▲	ZIP CODE ▲
	I	ephone Number	
safety deposit boxes or r	tories: List all banks or other depositories in which the maintains funds. Bank	ne committee deposit	s funds, holds accounts, rents
Depository, etc.	₁ 2 North 2nd Street		
Mailing Address			
_			
	Harrisburg		17101

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DX 26141 NDRIA CITY •		FEC ID numbe	r C	pons
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		STATE	▲ ZIP CODE	<u> </u>
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FEC Form 1S (Revised 02/2017)

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

h). Joint Fundraisi r	ig i di tioipant.		
1.		FEC ID number	C
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7.			
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
FRIENDS OF AN	DY BARR COMMITTEE		
Mailing Address	332 W. LEE HIGHWAY		
	#303		
	WARRENTON	ı VA	20186
Relationship:	CITY A	STATE A	ZIP CODE A
riolationip.	OII I	SIAIL	ZII GODE A
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
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anks or Other Depositoratety deposit boxes or management of Bank, epository, etc.	ories: List all bandaintains funds. Capital Band	ks or other depositories in which	Telephone Number	ts funds, holds accounts, rent
anks or Other Depositor	ories: List all banlaintains funds.	ks or other depositories in which	Telephone Number	ts funds, holds accounts, rent
anks or Other Deposito	l ▼		Telephone Number	ts funds, holds accounts, rent
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TITLE OR POSITION		CITY A		
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Mailing Address				
	1.			
esignated Agent: Identif	y by name, addre	ess (phone number – optional)		
Connecte	d Organization	Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
	ATHENS		GA L	30605
Mailing Address	824 S MILLED	OGE AVE STE 101		
	004.01	NOT AVE OFF 101		
MAST VICTORY		ffiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
4.				
4			FEC ID number	C
3.			FEC ID number	C
3.			FEC ID number	C
1			FEC ID number	C

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5(g)	or(h). Joint Fundraisin	g Participant:	
	1.		FEC ID number C
	2.		FEC ID number C
	3.		FEC ID number
	4.		FEC ID number C
6.	Name of Any Connected MIKE ROGERS V	_	Iraising Representative, or Leadership PAC Sponsor
	Mailing Address	2523 WILSON BOULEVARD	
		#4	
		ARLINGTON	VA 22201
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee	nt Fundraising Representative Leadership PAC Sponso
8.		by name, address (phone number - optional)	
	Full Name		
	Mailing Address		
	TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE ▲
			Felephone Number
9.	Name of Bank, TD Bal	intains funds.	n the committee deposits funds, holds accounts, rents
	Depository, etc.	1398 Highway 9	
	Mailing Address		
		Old Dridge	
		Old Bridge	NJ 08857 - -
1		CITY A	STATE ▲ ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connecte	d Organization, Affiliated Committee, Joint Fund Y FUND	draising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 420521		
	ATLANTA	GA	30342
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect		nt Fundraising Representa	ative Leadership PAC Spo
Connect	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connect Designated Agent: Ident	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connect Designated Agent: Ident Full Name Mailing Address	ed Organization Affiliated Committee Join Join Join Join Join Join Join Joi		
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or research.	ed Organization Affiliated Committee Join ify by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or respectively. Depository, etc.	Affiliated Committee Affiliated Committee Affiliated Committee CITY CITY Ories: List all banks or other depositories in which naintains funds. Rim Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraising	Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
	BUDD VICTORY			
	Mailing Address	PO BOX 97275		
		RALEIGH	NC NC	27624
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint 6	Fundraising Representa	tive Leadership PAC Sponsor
3.		by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	ephone Number	
9.	safety deposit boxes or mai	ies: List all banks or other depositories in which the intains funds. 's United Bank	ne committee deposits	s funds, holds accounts, rents
	Mailing Address	14 S. Moger Avenue		
	Mailing Address	14 S. Moger Avenue		
	Mailing Address	14 S. Moger Avenue Mt. Kisco	NY	10549

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundrais	sing Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Mailing Address	P.O. BOX 420304		
	ATLANTA	GA	30342
Relationship:	CITY ▲	STATE A	ZIP CODE A
Connec	ted Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponso
Designated Agent: Ident	tify by name, address (phone number – optional)		
Designated Agent: Ident	tify by name, address (phone number – optional)	1 1 1 1 1 1 1	
	tify by name, address (phone number – optional)		
Full Name	tify by name, address (phone number – optional)		
Full Name	tify by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		
Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or response to the control of the co	CITY ▲ Tel tories: List all banks or other depositories in which t	STATE ▲	ZIP CODE A
Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposisafety deposit boxes or response to the position of Bank, Depository, etc.	CITY ▲ CITY ▲ tories: List all banks or other depositories in which to maintains funds. acle Bank	STATE ▲	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

Page <u>36</u> **of** <u>199</u>

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
Name of Any Connected Davidson Victory I	Organization, Affiliated Committee, Joint I	Fundraising Representativ	re, or Leadership PAC Sponsor
Mailing Address	499 S. Capitol Street SW		
	Suite 407		
	Washington	DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee	Joint Fundraising Represent	tative Leadership PAC Spons
Full Name	by name, address (phone number – option		
Mailing Address			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
		Telephone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in vintains funds. unties Bank 210 N. Tehama	which the committee deposit	ts funds, holds accounts, rents
	Willows	CA	95988
	CITY ▲	STATE ▲	ZIP CODE ▲

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 CRAMER VICTOR		aising Representative	
	Mailing Address	PO BOX 26141		
		ALEXANDRIA	VA VA	22313
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	•		
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds. gton National Bank	STATE A	ZIP CODE A
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
9.	Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds. gton National Bank	STATE A	ZIP CODE A
9.	Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds. gton National Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi			
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 Fun	draising Representativ	e, or Leadership PAC Spons
WESTERN MICH	HIGAN VICTORY FUND		
	228 S. Washington Street		
Mailing Address			
	Suite 115		
	Alexandria	VA VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	tative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Jo	int Fundraising Represent	tative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int 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)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identii 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	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which adintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identii 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 adintains 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 maname of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which adintains 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 management and ame of Bank, US Banks US Ba	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
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or maname 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 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	C
4.		FEC ID number	С
4.			
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
JAKE ELLZEY V	ICTORY FUND		
Mailing Address	PO BOX 30844		
Mailing / Idanoss			
	BETHESDA	ı ı MD ı	20824
Deletionship			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	tive Leadership PAC S
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		
Full Name	CITY A		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, Amari	CITY A CITY A pries: List all banks or other depositories in which aintains funds. Ilo National Bank	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, Amari	CITY A CITY A pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A CITY A Pries: List all banks or other depositories in which aintains funds. Illo National Bank A10 S. Taylor Street	STATE A	ZIP CODE ZIP CODE s funds, holds accounts, ren
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A CITY A pries: List all banks or other depositories in which aintains funds. Ilo National Bank	STATE A	ZIP CODE A

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5(g)	or(h). 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.		Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
	NCFL			
	Mailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	GA	30605
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name		1 1 1 1 1 1 1	
	Full Name	<u> </u>		
	Full Name Mailing Address			
		CITY A	STATE A	ZIP CODE A
	Mailing Address	•		
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	Teles: List all banks or other depositories in which the intains funds.	STATE ▲ ephone Number	ZIP CODE A
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	Teles: List all banks or other depositories in which the intains funds. Vay Bank	STATE ▲ ephone Number	ZIP CODE A
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mathematical boxes or mathematical boxes. Broady	Teles: List all banks or other depositories in which the intains funds.	STATE ▲ ephone Number	ZIP CODE A
Э.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching boxes or matching between the pository, etc.	Teles: List all banks or other depositories in which the intains funds. Vay Bank	STATE ▲ ephone Number	ZIP CODE A
Э.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching boxes or matching between the pository, etc.	Teles: List all banks or other depositories in which the intains funds. Vay Bank	STATE ▲ ephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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or(h). Joint Fundraisi i	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 64845		
	BATON ROUGE	LA	70896
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Ownerstate Affiliated Committee	Fundraising Representa	tive Leadership PAC Spons
Connecte Posignated Agent: Identif		undraising Representa	Leadership 1 AO Opons
Designated Agent: Identif	y by name, address (phone number – optional)	undraising Representa	Leadership I AC Sports
Designated Agent: Identif		undraising Representa	Leadership TAC Sporis
Designated Agent: Identif		undraising Representa	Leadership FAC Sporis
Designated Agent: Identification Full Name Mailing Address	y by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identif	y by name, address (phone number – optional) CITY		
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Chain Depository, etc.	y by name, address (phone number – optional) CITY Tele Ories: List all banks or other depositories in which the aintains funds. Bridge Bank	STATE A	ZIP CODE A
Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Chain	y by name, address (phone number – optional) CITY Tele Ories: List all banks or other depositories in which the aintains funds.	STATE A	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Chain Depository, etc.	y by name, address (phone number – optional) CITY Tele Ories: List all banks or other depositories in which the aintains funds. Bridge Bank 1445-A Laughlin Avenue	STATE A ephone Number	ZIP CODE S funds, holds accounts, rents
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Chain Depository, etc.	y by name, address (phone number – optional) CITY Tele Ories: List all banks or other depositories in which the aintains funds. Bridge Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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or(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
RUTHERFORD V			
Mailing Address	3030 HARTLEY RD		
	STE 120		
	JACKSONVILLE	FL L	32257
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sponse
Full Name	by name, address (phone number – optional)		
. 3			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE A
		Telephone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in whintains funds. nird Bank P.O. Box 630900	ch the committee deposit	ts funds, holds accounts, rents
	Cincinnati	OH	45263

FEC Form 1S (Revised 02/2017)

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

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(h). Joint Fundrais			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connecte	d Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
FEENSTRA VIC	TORY FUND		
Mailing Address	PO BOX 183		
	HUDSON	WI	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee S J	oint Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident			Leadership PAC Spo
Pesignated Agent: Ident			Leadership PAC Spo
Pesignated Agent: Ident Full Name L Mailing Address	ify by name, address (phone number – optional)		
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in white naintains funds. Of Santa Clarita 27441 Tourney Road	STATE Telephone Number ich the committee deposit	ZIP CODE s funds, holds accounts, rents
Full Name	cories: List all banks or other depositories in white naintains funds.	STATE A Telephone Number	ZIP CODE A s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	g . ao.pa		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
		FEC ID number	С
4.			
	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
CALVERT VICTO	ORY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint Joint by by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION Janks or Other Deposite afety deposit boxes or me	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or maname of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds. of North Georgia	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.	<u>, , , , , , , , , , , , , , , , , , , </u>	FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected JOHNSON LEADI	Organization, Affiliated Committee, Joint Fundraisi	ng Representative	e, or Leadership PAC Sponsor
	Mailing Address	2900 CLEARVIEW PKWY		
		SUITE 206 METAIRIE	LA .	, 70006
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
			ndraising Representa	
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	•	STATE ▲	ZIP CODE 🛦
	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the aintains funds.	none Number	
	Banks or Other Depositor safety deposit boxes or ma	Teleph	none Number	
	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the aintains funds.	none Number	
	Banks or Other Depositor safety deposit boxes or matching boxes or matching bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds.	none Number	
	Banks or Other Depositor safety deposit boxes or matching boxes or matching bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds.	none Number	

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or(h). Joint Fundraisin	g Participant:		
		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
4.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
STEIL VICTORY I	FUND		
Mailing Address	1818 MILTON AVE		
	#1448		
	JANESVILLE	WI	53545
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	int Fundraising Representa	ative Leadership PAC Sponsor
Full Name	by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
		Telephone Number	
Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.		ch the committee deposit	s funds, holds accounts, rents
Mailing Address	P.O. Box 4418		
		1 1 1 1 1 1 1	
	Atlanta	GA	30302
	CITY ▲	STATE ▲	ZIP CODE ▲

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5(g) or (h). Joint Fundraising	Participant:		
1.	FE	EC ID number	C
2.	FE	EC ID number	C
3.	FE	EC ID number	C
4	FE	EC ID number	C
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising	g Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 30844		
	BETHESDA		20824-0844
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected (Organization Affiliated Committee	Iraising Representa	tive Leadership PAC Sponsor
8. Designated Agent: Identify b	by name, address (phone number – optional)		
Full Name			
Mailing Address			
TITLE OR POSITION V	CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION \		STATE A	ZIP CODE ▲
9. Banks or Other Depositories safety deposit boxes or main Name of Bank, National	Telepho	one Number	
9. Banks or Other Depositoric safety deposit boxes or main Name of Bank, National Depository, etc.	Telephones: List all banks or other depositories in which the contains funds.	one Number	
9. Banks or Other Depositories safety deposit boxes or main Name of Bank, Depository, etc.	es: List all banks or other depositories in which the contains funds.	one Number	
9. Banks or Other Depositoric safety deposit boxes or main Name of Bank, Depository, etc.	es: List all banks or other depositories in which the contains funds.	one Number	

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1.	g Participant:	FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundrais HOUSE TEXAS 2022	sing Representative	e, or Leadership PAC Sponsor
TAKE BACK THE	HOUSE TEXAS 2022		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization	undraising Representa	ative Leadership PAC Sponse
	by name, address (phone number – optional)		
Designated Agent: Identify			
Designated Agent: Identify Full Name			
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identify Full Name	by name, address (phone number – optional) CITY	STATE A	
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY Teleparies: List all banks or other depositories in which the	STATE A	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail	by name, address (phone number – optional) CITY Teleparies: List all banks or other depositories in which the	STATE A	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Access	composition of the depositories in which the sintains funds.	STATE A	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	composition of the state of the	STATE A	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the sintains funds. S National Bank 1800 Robert Fulton Drive	STATE A	ZIP CODE A

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Page 49 of 199

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
•	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	10 N. CADDO ST.		
	PMB #174 CLEBURNE	TX	76031
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee	Fundraising Representa	Leadership PAC Spons
Full Name	by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	CITY A	STATE A	ZIP CODE ▲
IIILE ON POSITION	1	ephone Number	
safety deposit boxes or mai	es: List all banks or other depositories in which the ntains funds. America 31531 Santa Margarita Parkway	ne committee deposit	s funds, holds accounts, rents
	Rancho Santa Marga	CA	92688
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Name of Any Connected Chris Stewart Fre		ffiliated Committee, J	oint Fundrais	sing Representa	itive, or Le	adership PAC Sponsor
	610 S. BOULE	EVAPD				
Mailing Address	010 3. BOOLE	VARD				
	TAMBA					2000
	TAMPA			FL		3606
		CITY A		STATE	A	ZIP CODE ▲
Relationship:		7				
	Organization by name, addre	Affiliated Committee		ındraising Repres	entative	Leadership PAC Spon
Connected Designated Agent: Identify Full Name				undraising Repres	entative	Leadership PAC Spon
Connected Designated Agent: Identify				undraising Repres	entative	Leadership PAC Spon
Connected Designated Agent: Identify Full Name						Leadership PAC Spon
Connected Designated Agent: Identify Full Name		ess (phone number – c				
Connected Designated Agent: Identify Full Name	by name, addre					Leadership PAC Spon

FEC Form 1S (Revised 02/2017)

		FEC ID number	C
			C
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		FEC ID number	С
		FEC ID number	С
Organization, Affiliated Com	nmittee, Joint Fundrai	sing Representative	e, or Leadership PAC Spor
P.O. Box 30844			
. Rethesda		MD .	20824
	74.		
			ZIP CODE ▲ ative Leadership PAC S
	<u> </u>		
1			
			1
CITY	_	STATE ▲	ZIP CODE ▲
· 	Tele	phone Number	
ies: List all banks or other d ntains funds. apital Bank of Texas	lepositories in which the	e committee deposit	s funds, holds accounts, ren
310 West Wall Street			
310 West Wall Street Suite 100			
	P.O. Box 30844 Bethesda CIT Organization Affiliated Co by name, address (phone note) CITY CITY ies: List all banks or other dentains funds.	P.O. Box 30844 CITY Organization Affiliated Committee by name, address (phone number – optional) CITY Tele ies: List all banks or other depositories in which the ntains funds.	Bethesda CITY A STATE A Organization Affiliated Committee V Joint Fundraising Representa by name, address (phone number – optional) CITY A STATE A Telephone Number ies: List all banks or other depositories in which the committee deposits ntains funds.

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisin		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
TEAM DUNCAN			<u> </u>
Mailing Address	228 S. WASHINGTON STREET		
Mailing Address	SUITE 115		
	ALEXANDRIA	ı VA	22314
Relationship:	CITY A	STATE A	ZIP CODE A
riolationionip.		SIAIL	ZII OODL 🗷
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify	y by name, address (phone number – optional)		
esignated Agent: Identify	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, Union	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds. Bank	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds. Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) or (h).	Joint Fundraising	p Participant:		
1.			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	C
4.			FEC ID number	C
6. Name	of Any Connected (Organization, Affiliated Committee, Joint Fundral	ising Representative	e, or Leadership PAC Sponsor
TE	EAM MCCAUL T	EXAS VICTORY		
		4005 00NODE00 AVE 0TE 400		
1	Mailing Address	1005 CONGRESS AVE STE 400		
		AUSTIN	TX	78701
!	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	ative Leadership PAC Sponsor
B. Desig ı	nated Agent: Identify	by name, address (phone number - optional)		
	nated Agent: Identify	by name, address (phone number – optional)		
Fu		by name, address (phone number – optional)		
Fu	ıll Name	by name, address (phone number – optional)		
Fu	ıll Name	by name, address (phone number – optional)		
Fu Ma	ull Name	CITY A	STATE A	ZIP CODE A
Fu Ma	ıll Name	CITY A	STATE A	
Fu Ma	ailing Address	CITY A	ephone Number	ZIP CODE ▲
Fu Ma T 9. Banks	ailing Address	CITY CITY Tele ies: List all banks or other depositories in which the	ephone Number	ZIP CODE ▲
Fu Ma	ailing Address TITLE OR POSITION s or Other Depositor	CITY CITY Tele ies: List all banks or other depositories in which the ntains funds.	ephone Number	ZIP CODE ▲
Fu Ma T 	ailing Address TITLE OR POSITION s or Other Depositor deposit boxes or mail of Bank, Forcht	CITY CITY Tele ies: List all banks or other depositories in which the ntains funds.	ephone Number	ZIP CODE ▲
Fu Ma T 	ailing Address TITLE OR POSITION s or Other Depositor deposit boxes or mai of Bank, Forcht sitory, etc.	CITY CITY Tele ies: List all banks or other depositories in which the ntains funds. Bank	ephone Number	ZIP CODE ▲
Fu Ma T 	ailing Address TITLE OR POSITION s or Other Depositor deposit boxes or mai of Bank, Forcht sitory, etc.	CITY CITY Tele ies: List all banks or other depositories in which the ntains funds. Bank	ephone Number	ZIP CODE ▲

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
5.	=	Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
	THE BERGMAN \	/ICTORY COMMITTEE		
	Mailing Address	824 S. MILLEDGE AVE		
	Mailing Address	SUITE 101		
		ATHENS	ı GA ı	30605
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	I Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		1		
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	•		
	TITLE OR POSITION	•	STATE A	
) .		Tele	STATE A	ZIP CODE A
).	Banks or Other Depositor safety deposit boxes or ma	Tele	STATE A	ZIP CODE A
).	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds.	STATE A	ZIP CODE A
).	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds. rgan Chase Bank, NA	STATE A	ZIP CODE A
Э.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds. rgan Chase Bank, NA	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
3.		Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
	TAKE BACK THE	HOUSE CALIFORNIA 2022		
	Mailing Address	P.O. BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
	HILE ON FUSITION		SIAIL	Z11 00DL Z
		1	1	
		1	ephone Number	
9.	Banks or Other Depositor	Tele	ephone Number	
).	Banks or Other Depositor safety deposit boxes or ma	Tele	ephone Number	
).	safety deposit boxes or ma	Tele	ephone Number	
Э.	Name of Bank, River	ries: List all banks or other depositories in which the intains funds.	ephone Number	
).	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.	ephone Number	
Э.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.	ephone Number	

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisin	n Particinant		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected ADRIAN SMITH V	Organization, Affiliated Committee, Joint Fundrai ICTORY FUND	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint F	- undraising Representa	ative Leadership PAC Spons
Full Name			
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	Tele	ephone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds. nird Bank 1701 Boy Scout Road	ne committee deposit	s funds, holds accounts, rents
	Fort Myers	, FL	22007
			33907

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

1	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e. or Leadership PAC Spon
WITTMAN VICTO	_	3	,
L			
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	, , VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify Full Name	by name, address (phone number – optional)		1 1 1 1 1 1 1 1 1 1
	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 lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition are also as a contract to the contract to th	CITY CITY Tel ries: List all banks or other depositories in which t intains funds.	lephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	CITY CITY Tel ries: List all banks or other depositories in which t intains funds.	lephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	CITY CITY Tel ries: List all banks or other depositories in which to intains funds.	lephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	CITY CITY Tel ries: List all banks or other depositories in which to intains funds.	lephone Number	

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

1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Ponrosontative	or Loadorchin PAC Spon
•	ORY COMMITTEE	aising riepresemative	e, or Leadership FAO Spon
Mailing Address	228 S. WASHINGTON STREET		
. J	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	d Organization Affiliated Committee Joint Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or materials and the companion of Bank, Towne	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or materials and the companion of Bank, Towne	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

afety deposit boxes or ma			Telephone Number h the committee depos	its funds, holds accounts, rents
Banks or Other Depositor cafety deposit boxes or many same of Bank, Depository, etc.	aintains funds. tate Bank			its funds, holds accounts, rents
Banks or Other Depositor cafety deposit boxes or many same of Bank, Depository, etc.	aintains funds. tate Bank			its funds, holds accounts, rents
Banks or Other Depositor afety deposit boxes or ma	aintains funds.			its funds, holds accounts, rents
Banks or Other Depositor				its funds, holds accounts, rents
	ries: List all banks or			its funds, holds accounts, rents
TITLE OR POSITION			Telephone Number	
TITLE OR POSITION				
	▼	CITY A	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
Designated Agent: Identify	by name, address (pl	hone number – optional)		
Connected	d Organization Affi	iliated Committee X Joi	nt Fundraising Represen	tative Leadership PAC Spo
Relationship:	_	CITY A	STATE A	ZIP CODE ▲
	ALEXANDRIA		VA VA	22313
Mailing Address	P.O. BOX 26141			
BALDERSON VIC	TORY COMMIT			
	=		draising Representati	ve, or Leadership PAC Spons
4.			T LO 1D Humber	0
3.			FEC ID number	C
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2.				
			FEC ID number	C

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h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spor
ARRINGTON VIC	TORY COMMITTEE		
<u> </u>			
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, , VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization	nt Fundraising Representa	ative Leadership PAC S
Full Name			
Mailing Address			
	I	1 1 1	1 1 1
TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	▼ CITY ▲		
anks or Other Depositor	CITY ▲ ries: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
anks or Other Depositor	CITY ▲ ries: List all banks or other depositories in which aintains funds.	STATE ▲ Telephone Number	ZIP CODE A
anks or Other Depositor fety deposit boxes or ma	CITY ▲ ries: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
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anks or Other Depositor of the deposit boxes or make the deposit boxes or make the depository, etc.	ries: List all banks or other depositories in which aintains funds. ommunity Credit Union	STATE ▲ Telephone Number	ZIP CODE A
anks or Other Depositor aftery deposit boxes or material deposit boxes are material depository, etc.	ries: List all banks or other depositories in which aintains funds. ommunity Credit Union	STATE ▲ Telephone Number	ZIP CODE A

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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 GREG PENCE V	d Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
Mailing Address	P.O. BOX 275		
	TAYLORSVILLE	IN L	47280
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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 A	STATE A	ZIP CODE A
Full Name	CITY A		
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposits safety deposit boxes or mailing address	CITY ▲ CITY ▲ Tel ories: List all banks or other depositories in which telepositories in which it was a proper which it which telepositories in which it was a proper which it was a proper which	STATE ▲ Iephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposits safety deposit boxes or make the property of the position of the positi	CITY ▲ CITY ▲ Tel cories: List all banks or other depositories in which the intaintains funds. Tel cories that all banks or other depositories in which the intaintains funds.	STATE ▲ Iephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	370 EAST SOUTH TEMPLE		
	SUITE 580		
	SALT LAKE CITY	UT	84111
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization	- undraising Representa	tive Leadership PAC Sponso
		unutaising nepresenta	Leadership FAC Sponso
Designated Agent: Identification	y by name, address (phone number – optional)	undraising nepresente	Leadership PAC Sponso
Designated Agent: Identif		undraising nepresenta	Leadership FAC Sponso
Designated Agent: Identification		undraising nepresenta	Leadership PAC Sponso
Designated Agent: Identification Full Name Mailing Address	y by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identification	y by name, address (phone number – optional) CITY		
Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or mailing and ma	y by name, address (phone number – optional) CITY Tele Ories: List all banks or other depositories in which the	STATE A	ZIP CODE A
Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the property of the position of the posi	y by name, address (phone number – optional) CITY CITY Tele Ories: List all banks or other depositories in which the aintains funds. Ington Bank 1901 Breton Road SE	STATE A ephone Number ne committee deposits	ZIP CODE S funds, holds accounts, rents
Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the property of the position of the posi	y by name, address (phone number – optional) CITY Tele Ories: List all banks or other depositories in which the aintains funds. Ington Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		EC ID number	
	2.		EC ID number	
	3.		EC ID number	
	4		EC ID number	
6.	Name of Any Connected KIM VICTORY FU	Organization, Affiliated Committee, Joint Fundraisi	g Representative, or Leadership P	PAC Sponsor
	Mailing Address	9460 TEGNER ROAD		
		HILMAR	CA 95324	<u> </u>
	Relationship:	CITY A	STATE ▲ ZIP C	ODE A
	Connected	Organization Affiliated Committee	draising Representative Leadersh	nip PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name		STATE A ZID CO	-
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8.	Full Name	CITY A		
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY A Teleph ries: List all banks or other depositories in which the	STATE A ZIP CO]-[
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Teleph Ties: List all banks or other depositories in which the intains funds.	STATE A ZIP CO]-[
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching and the position of Bank, Atlantic	CITY CITY Teleph ries: List all banks or other depositories in which the intains funds.	STATE A ZIP CO]-[
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Teleph Ties: List all banks or other depositories in which the intains funds. Cunion Bank 1800 Robert Fulton Drive	STATE A ZIP CO]-[

FEC Form 1S (Revised 02/2017)

h). Joint Fundraising	Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
WALBERG WINNI	NG UNDER THE OAKS		
Mailing Address	2870 DOBIE ROAD		
	MASON	MI	48854
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected		Fundraising Representa	Zaive Zeadolollip 17/6 G
	by name, address (phone number – optional)		Leadership PAC S
esignated Agent: Identify			
esignated Agent: Identify Full Name			
esignated Agent: Identify Full Name			
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which ntains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which ntains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mai ame of Bank, Capital epository, etc.	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which ntains funds. Bank	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mai ame of Bank, Capital epository, etc.	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which ntains funds. Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

). Joint Fundraising	Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
		sing Representative	, or Leadership PAC Sponsor
JIAOBER VIOTO			
Mailing Address	332 W. LEE HIGHWAY		
	#303		
	WARRENTON	VA I	20186
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint F	undraising Representa	tive Leadership PAC Sponsor
signated Agent: Identify	by name, address (phone number - optional)		
Full Name			
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	Tele	ephone Number	
		e committee deposits	s funds, holds accounts, rents
	City Bank		
	2365 W. Broad Street		
Mailing Address			
	I		1
	Athens	GA	30606
	1.	1.	FEC ID number FEC ID

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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
Name of Any Connected	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	undraising Representa	ative Leadership PAC Sponso
Full Name	by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	CITY ▲	STATE A	ZIP CODE A
LILL ON POSITION	I	phone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in which the aintains funds. ng Bank 1044 William Floyd Parkway	committee deposit	s funds, holds accounts, rents
	Shirley	ı ıNYı	11967

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

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fu DRY COMMITTEE	ndraising Representative	e, or Leadership PAC Spons
WATRING VICTO			
Mailing Address	PO BOX 30844		
	BETHESDA	, , , MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecto	ed Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Spo
Connecto			ative Leadership PAC Spo
Connecte Connecte Connecte Connecte Connecte Connecte	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee Affiliated Committee J T T T T T T T T T T T T		Leadership PAC Spo
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Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or mailing and mailing	Affiliated Committee fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit bafety deposit boxes or make the safety deposit boxes or m	Affiliated Committee Affiliated Committee Type by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in what in a funds.	STATE A Telephone 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 safety deposit boxes or make the safety depository, etc.	Affiliated Committee fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in what intains funds. Citizens Bank	STATE A Telephone 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 safety deposit boxes or make the safety depository, etc.	Affiliated Committee fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in what intains funds. Citizens Bank	STATE A Telephone Number	ZIP CODE A

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	C
2.			FEC ID	number	С
3.			FEC ID	number	С
4.			FEC ID	number	С
ame of Any Connected	Organization, Affiliated	Committee, Joint F	undraising Rep	resentativ	re, or Leadership PAC Spon
DAN CRENSHAV	V VICTORY COM	MITTEE		1 1 1	
I					
Mailing Address	824 S MILLEDGE AVE	E STE 101			
	ATHENS			GA	30605
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connecte	d Organization Affilia	ated Committee	Joint Fundraising	Represent	tative Leadership PAC S
Connecte esignated Agent: Identif		ated Committee		Represent	tative Leadership PAC S
Connecte		ated Committee		Represent	tative Leadership PAC S
Connecte esignated Agent: Identif		ated Committee		Represent	tative Leadership PAC S
Connecte esignated Agent: Identif	y by name, address (pho	one number – optiona	i)		
Connecte esignated Agent: Identif	y by name, address (pho	ated Committee	i)	Represent	
esignated Agent: Identification Full Name Mailing Address	y by name, address (pho	one number – optiona	i)	STATE A	
esignated Agent: Identification Full Name Mailing Address	y by name, address (pho	one number – optiona	1)	STATE A	
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Connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mane of Bank, epository, etc.	y by name, address (pho	one number – optiona	I) S Telephone Nu	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisin	ια Participant:		
1. L		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	12176 CHANCERY STATION CIR		
	, RESTON	ı VA ı	20190
Deletionshim			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	undraising Representa	tive Leadership PAC Spons
Pull Name	y by name, address (phone number – optional)		
Mailing Address			
	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	CITY ▲	STATE A	ZIP CODE A
TITLE OR POSITION	•		ZIP CODE A
Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which th	STATE A	
Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which th	STATE A	
Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which thaintains funds.	STATE A	
Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which thaintains funds. 1445 New York Avenue NW	STATE A	s funds, holds accounts, rents
Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which thaintains funds.	STATE A	

FEC Form 1S (Revised 02/2017)

Banks safety Name	TITLE OR POSITION	ies: List all banl	CITY A ks or other depositories in	Telephone N		s funds, ho	ZIP CODE A Ids accounts, I	rents
Banks safety Name	S or Other Depositor deposit boxes or mai of Bank, sitory, etc.	ies: List all banl			lumber			rents
Banks safety Name	S or Other Depositor deposit boxes or mai of Bank, sitory, etc.	ies: List all banl			lumber			rents
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Banks safety Name	S or Other Depositor deposit boxes or mai	ies: List all banl			lumber			rents
T	TILE OR POSITION	ies: List all banl			lumber			rents
		▼	CITY A	Telephone N			ZIP CODE A	
		V	CITY A		STATE A		ZIP CODE A	
Ma	alling Address							
Ma	aiiiig Address							
Ma	alling Address							
	ailing Address	1						
Fu	ıll Name							
Desig		Organization by name, addre	Affiliated Committee	Joint Fundraisir	g Representa	ative I	Leadership PAC	Sponsor
	Relationship:		CITY ▲	_	STATE ▲		ZIP CODE	\
		JACKSON			MS	39201		
	Mailing Address	120 N CONGR	RES ST STE 300					
	of Any Connected (JEST MAJORIT		ffiliated Committee, Join	Fundraising Re	presentativ	e, or Leade	ership PAC Sp	onsor
4.								
					D number	C		
3.					D number D number	C		
2.					D number	C		

FEC Form 1S (Revised 02/2017)

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
7-		J	
Name of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
GREG STEUBE	VICTORY FUND		
Mailing Address	499 SOUTH CAPITOL STREET SW		
	#407		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represent	
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			
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A

FEC Form 1S (Revised 02/2017)

1.					
			FEC II) number	С
2.			FEC II	number	С
3.			FEC II	number	C
4.			FEC II	number	С
Name of Any Connected LATTA VICTORY	_	ated Committee, Joint	Fundraising Rep	resentativ	e, or Leadership PAC Spons
Mailing Address	9856 ARCHER L	ANE			
	DUBLIN			OH	43017
Relationship:		CITY A		STATE A	ZIP CODE ▲
Full Manne					
Full Name					
Mailing Address					
		CITY A		STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	▼	1	Telephone N		ZIP CODE A
Mailing Address TITLE OR POSITION	ories: List all banks		Telephone N	umber	ZIP CODE A s funds, holds accounts, rents
Mailing Address TITLE OR POSITION	ories: List all banks	or other depositories in	Telephone N	umber	
Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or main and the safety deposit boxes or	ories: List all banks	or other depositories in	Telephone N	umber	s funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or mail and the composition of Bank, Depository, etc.	ories: List all banks	or other depositories in	Telephone N	umber	s funds, holds accounts, rents

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

Mailing Address TITLE OR POSITION anks or Other Depositor Deposi	ories: List all ban	CITY A	ST Telephone Nun		ZIP CODE ZIP CODE funds, holds accounts, rent
TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition of Bank, depository, etc.	ories: List all ban	CITY A	ST Telephone Nun	nber	ZIP CODE A
TITLE OR POSITION anks or Other Depositor defety deposit boxes or management of Bank,	ories: List all ban	CITY A	ST Telephone Nun	nber	ZIP CODE A
TITLE OR POSITION	ories: List all ban	CITY A	ST Telephone Nun	nber	ZIP CODE A
			ST		
			ST		
				ATE A	
Mailing Address			, , , , ,		
Mailing Address					
Mailing Address					
Full Name					
esignated Agent: Identif	y by name, addr	ess (phone number – optiona	l)		
Connecte	d Organization	Affiliated Committee	Joint Fundraising F	Representat	tive Leadership PAC Sp
Relationship:		CITY A		STATE A	ZIP CODE ▲
	DUBLIN			OH	43017
				<u> </u>	
Mailing Address	9856 ARCHE	R LANE			
GONZALEZ VICT	IOK I FUND	,			
		Affiliated Committee, Joint F	undraising Repre	sentative	or Leadership PAC Spons
4.					
			_ ∣ FEC ID ו		С
3.			FEC ID 1		C
3.			_ ∣ FEC ID ≀	number	С
1			FEC ID i		C

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

. 1	g Participant:				
1.			FEC ID	number	C
2.			FEC ID	number	C
3.			FEC ID	number	С
4.			FEC ID	number	С
		d Committee, Joint F	undraising Repr	esentativ	e, or Leadership PAC Spor
BUCKEYE VICTO	ORY FUND				
Mailing Address	499 SOUTH CAPITC	DL STREET SW			
Mailing Address	407				
	WASHINGTON			, DC ,	20003
Relationship:	- William Cross	CITY A			ZIP CODE A
	d Organization Affil		Joint Fundraising	STATE A	
Full Name					
Mailing Address	1				
g					<u> </u>
		CITY A		TATE A	ZIP CODE A
TITLE OR POSITION				TATE A	
TITLE OR POSITION	ries: List all banks or o	CITY A	S Telephone Nu	TATE mber	
TITLE OR POSITION	ries: List all banks or o	CITY A	S Telephone Nu	TATE mber	ZIP CODE A
TITLE OR POSITION	ries: List all banks or o	CITY A	S Telephone Nu	TATE mber	ZIP CODE A
TITLE OR POSITION anks or Other Depositor of the deposite boxes or material bank,	ries: List all banks or o	CITY A	S Telephone Nu	TATE mber	ZIP CODE A
anks or Other Depositor dety deposit boxes or material boxes are of Bank, epository, etc.	ries: List all banks or o	CITY A	S Telephone Nu	TATE mber	ZIP CODE A

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

	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	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spor
INDSTRONG			
Mailing Address	1515 BURNT BOAT DR NUM 112		
Mailing Address			
	BISMARCK	ı ND ı	1 58503
Dalatianahin			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Commode	ed Organization Affiliated Committee X Joi	nt Fundraising Representa	ative Leadership PAC S
	fy by name, address (phone number – optional)	g	Lawe Lawe Education Private C
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
Full Name Mailing Address	fy by name, address (phone number – optional) CITY CITY	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A

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

·		, FEC		
			ID number	C
		FEC	ID number	С
		FEC	ID number	С
		FEC	ID number	С
	ated Committee, Join	t Fundraising I	Representativ	e, or Leadership PAC Spon
ORY FUND			1 1 1 1	
		1 1 1 1	1 1 1 1	
. PO POY 2404				
PO BOX 2404				
COOKEVILLE			TN	38502
	CITY A		STATE A	ZIP CODE ▲
by name, address	(pnone number – optio	onai)		
	CITY A		STATE A	ZIP CODE A
		Telephone		
	PO BOX 2404 COOKEVILLE Organization	PO BOX 2404 COOKEVILLE CITY Organization Affiliated Committee	PO BOX 2404 COOKEVILLE CITY	PO BOX 2404 COOKEVILLE CITY STATE Organization Affiliated Committee Joint Fundraising Represent

FEC Form 1S (Revised 02/2017)

Relationship:	ATHENS CITY	GA STATE ▲	
Relationship:			
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Delethooth			
	ATHENS	GA	30605
	. ATHENS		. 30605
	ATHENE		30605
	ATHENS	ı GA	30605
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	ATHENS	GA	30605
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Relationship:	CITY A	STATE A	ZIP CODE ▲
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ed Organization Affiliated Committee X J		
	fy by name, address (phone number – optional)		
esignated Agent: Ident			
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		ZIP CODE A
esignated Agent: Ident	fy by name, address (phone number – optional)		ZIP CODE A

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	C
TEAM TIMMONS	Organization, Affiliated Committee, Joint Fur	ndraising Representativ	re, or Leadership PAC Spons
Mailing Address	228 S. WASHINGTON ST.		
3	STE. 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected esignated Agent: Identify	Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
			tative Leadership PAC Sp
esignated Agent: Identify			Leadership PAC Sp
esignated Agent: Identify			Leadership PAC Sp
esignated Agent: Identify			Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – optional)		ZIP CODE A
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposite boxes or maintain and the deposit boxes or maintain	by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY ries: 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). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
WESTERMAN V	ICTORY FUND		
	DO DOV MARK		
Mailing Address	PO BOX 21097		
	HOT SPRINGS	AR AR	71903
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
п.			
		nt Fundraising Representa	Leadership PAC S
	Affiliated Committee	nt Fundraising Represent	Leadership PAC S
		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	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 Representation	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
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 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
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
esignated Agent: Identic Full Name	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

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3		FEC ID number	C
4		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE, STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Pesignated 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	fy by name, address (phone number – optional)		
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	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 afety deposit boxes or make the same of Bank, Depository, etc.	CITY A CITY A pries: List all banks or other depositories in which	Telephone Number	

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or(h). Joint Fundraisin	g Participant:		
1.	F	EC ID number	С
2.	F	FEC ID number	С
3.	F	FEC ID number	С
4	F	FEC ID number	С
Name of Any Connected MEUSER VICTO	Organization, Affiliated Committee, Joint Fundraisi	ng Representative	e, or Leadership PAC Sponsor
WEOSEK VICTOR			
Mailing Address	499 SOUTH CAPITOL STREET SW		
	#405 		
	WASHINGTON	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		draising Representa	Leadership PAC Spon
Designated Agent: Identify Full Name	d Organization Affiliated Committee Joint Fun	draising Representa	ative Leadership PAC Spon
Designated Agent: Identify		draising Representa	Leadership PAC Spon
Designated Agent: Identify Full Name		draising Representa	Leadership PAC Spon
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	draising Representa	Leadership PAC Spon
Designated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail	ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the	STATE A	ZIP CODE A

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1.						
			F	EC ID number	C	
2			F	FEC ID number	С	
3.			F	EC ID number	C	
4.			F	FEC ID number	C	
ame of Any Connected		ted Committee, Join	t Fundraisiı	ng Representativ	e, or Lead	lership PAC Spor
VAN TAYLOR VIC	CTORY FUND					
			<u> </u>			
Moiling Addus of	1900 PRESTON R	OAD				
Mailing Address	#267 - PMB 229					
	PLANO			, TX ,	7509)3
Relationship:		CITY ▲				ZIP CODE A
	d Organization	Affiliated Committee		STATE draising Represent		Leadership PAC S
Full Name						
Mailing Address						
TITLE OR POSITION	*	CITY A		STATE ▲		ZIP CODE ▲
			Teleph	none Number		
		r other depositories ir	n which the	committee deposi	its funds, h	olds accounts, ren
anks or Other Depositor						
afety deposit boxes or ma						
ufety deposit boxes or ma name of Bank,						
arme of Bank, epository, etc.						

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisi r	g Participant:		
		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
DAN BISHOP VIO	CTORY COMMITTEE		
Mailing Address	10809 GRASSY CREEK PL		
	RALEIGH	NC NC	27614
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	int Fundraising Representa	ative Leadership PAC Sponso
Full Name			
Mailing Address			
		1 1 1 1 1 1 1	
	1		1
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	1	Telephone Number	
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in whicaintains funds.	h the committee deposit	s funds, holds accounts, rents
Name of Bank, Depository, etc.			<u> </u>
Mailing Address			
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun	draising Representativ	re, or Leadership PAC Spon
TEAM HUIZENG	A 		
	PO BOX 2485		
Mailing Address	1 0 30 2 - 100		
	SPRINGFIELD	VA	22152
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		int Fundraising Represent	tative Leadership PAC Sp
	Affiliated Committee	int Fundraising Represent	tative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	tative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE 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 Ories: List all banks or other depositories in which	STATE Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

TITLE OR POSITION Banks or Other Depositor safety deposit boxes or material safety deposit boxes or material safety depository, etc. Mailing Address	ries: List all banks o		STATE A Telephone Number the committee deposit	ZIP CODE s funds, holds accounts, rents
Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks o	т	elephone Number	
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks o	т	elephone Number	
TITLE OR POSITION	V	I	1	ZIP CODE ▲
TITLE OR POSITION	▼	CITY A	STATE ▲	ZIP CODE ▲
			1 1 . 1	
Mailing Address				
Full Name				
		Affiliated Committee X Join (phone number – optional)	t Fundraising Representa	Leadership PAC Spon
Relationship:	_	CITY A	STATE ▲	ZIP CODE ▲
	BETHESDA		MD	20824
Mailing Address	PO BOX 30844			
Name of Any Connected TEAM GT	Organization, Affilia	ated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
4			FEC ID number	C
I			FEC ID number	C
3.			FEC ID number	C

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisi n	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
		FEC ID number	C
7.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ındraising Representativ	e, or Leadership PAC Sponsor
CAWTHORN TRI	UMPH COMMITTEE		
Mailing Address	3103 JULIAN GLEN CIR		
	WAXHAW	NC NC	28173
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Joint Fundraising Representa	ative Leadership PAC Sponso
Full Name			1 1 1 1 1 1 1 1 1 1
Mailing Address			
	1		I I-I
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
Banks or Other Deposito	ries: List all banks or other depositories in wh	ich the committee deposit	s funds, holds accounts, rents
safety deposit boxes or ma	aintains funds.		
Name of Bank, Depository, etc.			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

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
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
MILLER-MEEKS	VICTORY FUND		
Mailing Address	PO BOX 183		
	HUDSON	wi	54016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership TAC o
	fy by name, address (phone number – optional)	Trundialsing nepresent	Leadership TAC S
esignated Agent: Identi		Trundialsing nepresent	Leadership TAC S
esignated Agent: Identi		Trundraising nepresent	Leadership PAC S
esignated Agent: Identi		Trundraising nepresent	Leadership TAC S
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
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 Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

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

h). Joint Fundraisi	ng Faiticipant.		
1.		FEC ID number	C
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 Spon
AMERICAN DRE	AM VICTORY FUND		
	9070 IRVINE CENTER DRIVE		
Mailing Address			
	SUITE 150		
	IRVINE 	CA	92618
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join Join by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	
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 Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and the second content of the second content	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1	g Participant:				
1.			FEC	ID number	C
2.			FEC	ID number	С
3.			FEC	ID number	С
4.			FEC	ID number	С
	=		Fundraising R	epresentativ	e, or Leadership PAC Spon
GIMENEZ VICTO	RY COMMITTEE	:			
Mailing Address	824 S MILLEDGE AV	E STE 101			
	ATHENS			GA L	30605
Relationship:		CITY ▲		STATE ▲	ZIP CODE ▲
esignated Agent: Identify Full Name	by name, address (pri	one number – optioi	iai)		
I uli Ivallie					
Mailing Address					
Mailing Address		CITY A		STATE A	ZIP CODE A
			Telephone		
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main	▼ ies: List all banks or o	CITY A	Telephone	Number	
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main arms of Bank,	▼ ies: List all banks or o	CITY A	Telephone	Number	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main arms of Bank,	▼ ies: List all banks or o	CITY A	Telephone	Number	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main arms of Bank, epository, etc.	▼ ies: List all banks or o	CITY A	Telephone	Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or management of Bank, Depository, etc. Mailing Address	ories: List all banks	CITY sor other depositories in which	STATE Telephone Number ch the committee deposi	ZIP CODE ts funds, holds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.	ories: List all banks		Telephone Number	
Banks or Other Depositorsafety deposit boxes or management	ories: List all banks		Telephone Number	
Banks or Other Depositorsafety deposit boxes or ma	ories: List all banks		Telephone Number	
TITLE OR POSITION	▼	CITY A		ZIP CODE A
TITLE OR POSITION	▼	CITY A	STATE ▲	ZIP CODE ▲
			1 1 . 1	I I-I
Mailing Address				
Full Name				
Designated Agent: Identif	y by name, addres	s (phone number – optional)		
Connecte	d Organization	Affiliated Committee X Jo	oint Fundraising Represent	tative Leadership PAC Spo
Relationship:		CITY 🛦	STATE A	ZIP CODE ▲
	BETHESDA		, MD	20824
Mailing Address	PO BOX 30844			
Name of Any Connected BURGESS VICTO		iliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Sponse
4			FEC ID number	C
			FEC ID number	С
3.			FEC ID number	С
2				

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5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
6.		Organization, Affiliated Committee, Joint Fundr	raising Representative, o	r Leadership PAC Sponsor
	RESCHENTHALE	ER VICTORY FUND		
	Mailing Address	824 S MILLEDGE AVE		
	ag / taa/355	SUITE 101		
		ATHENS	ı GA ı	30605
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representative	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
		1		
	TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
		1	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposits fu	nds, holds accounts, rents
	Name of Bank, Depository, etc.			
	Depository, etc.			
	Depository, etc.			

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

TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or many Name of Bank, Depository, etc. Mailing Address	ories: List all banks	CITY s or other depositories in whi	STATE A Telephone Number ich the committee deposi	ZIP CODE ZIP CODE ts funds, holds accounts, rents
Banks or Other Deposito cafety deposit boxes or management of Bank, Depository, etc.	ories: List all banks		Telephone Number	
Banks or Other Deposito cafety deposit boxes or management of Bank, Depository, etc.	ories: List all banks		Telephone Number	
Banks or Other Deposito safety deposit boxes or ma	ories: List all banks		Telephone Number	
Banks or Other Deposito	ories: List all banks		Telephone Number	
			Telephone Number	
TITLE OR POSITION		CITY A		ZIP CODE 🛦
TITLE OR POSITION	▼	CITY A	STATE ▲	ZIP CODE ▲
	1			
Mailing Address				
Full Name				
Designated Agent: Identify	y by name, addres	ss (phone number – optional)		
Connected	d Organization	Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Spo
Relationship:		CITY A	STATE A	ZIP CODE ▲
	NAPLES		, , , FL	34108
Ü	STE 108 PMB 2	260		
Mailing Address	2430 VANDERE	BILT BEACH ROAD		
Name of Any Connected BYRON DONALD	•		ndraising Representativ	e, or Leadership PAC Sponso
4.			FEC ID number	C
4.			FEC ID number	C
3.			FEC ID number	C

FEC Form 1S (Revised 02/2017)

	g Participant:				
1.			FEC	ID number	C
2.			FEC	ID number	C
3.			FEC	ID number	С
4.			FEC	ID number	С
		d Committee, Joint I	Fundraising R	epresentativ	e, or Leadership PAC Spor
GREEN VICTORY	Y FUND				
<u> </u>					
	PO BOX 2706				
Mailing Address					
	DDENTING OD				07004
	BRENTWOOD			L TN	37024
Relationship:	_	CITY A		STATE ▲	ZIP CODE ▲
					ative Leadership PAC S
esignated Agent: Identify	by name, address (ph	one number – option	al)		
esignated Agent: Identify	by name, address (ph	one number – option	al)		
	by name, address (ph	one number – option	al)		
Full Name	by name, address (ph	one number – option	al)		
Full Name		one number – option			
Full Name				STATE A	
Full Name				STATE A	
Full Name Mailing Address TITLE OR POSITION	▼ ries: List all banks or o	CITY A	Telephone	STATE A	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or main arme of Bank,	▼ ries: List all banks or o	CITY A	Telephone	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or main arme of Bank,	▼ ries: List all banks or o	CITY A	Telephone	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or main arms of Bank, epository, etc.	▼ ries: List all banks or o	CITY A	Telephone	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or material deposit boxes or material depository, etc.	▼ ries: List all banks or o	CITY A	Telephone	STATE A	ZIP CODE A

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

h). Joint Fundraisi r	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 Funda	raising Representative	e, or Leadership PAC Spons
LESKO VICTORY	COMMITTEE		
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, , VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee X Joint	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Y Joint y by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representation	
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition of Bank, epository, etc	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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
	Organization, Affiliated Committee, Joint Fo	ndraising Representativ	ve, or Leadership PAC Spon
TIFFANY VICTO	RY FUND		
	PO BOX 30844		
Mailing Address	FO BOX 30044		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	loint Fundraising Represen	tative Leadership PAC Sp
Connecte			tative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee		tative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee		tative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee x		tative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee fy by name, address (phone number – optiona		
esignated Agent: Identi	Affiliated Committee fy by name, address (phone number – optiona		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee fy by name, address (phone number – optiona CITY CITY Cries: List all banks or other depositories in wheel of the committee of the c	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 mane of Bank, epository, etc.	Affiliated Committee fy by name, address (phone number – optiona CITY CITY Cries: List all banks or other depositories in wheel of the committee of the c	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 mane of Bank,	Affiliated Committee fy by name, address (phone number – optiona CITY CITY Cries: List all banks or other depositories in wheel of the committee of the c	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 mane of Bank, epository, etc.	Affiliated Committee fy by name, address (phone number – optiona CITY CITY Cries: List all banks or other depositories in wheel of the committee of the c	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundraising	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 Fund	Iraising Representative	e, or Leadership PAC Spons
Mailing Address	8630 S PEORIA AVE		
	TULSA	OK OK	74132
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected		nt Fundraising Represent	ative Leadership PAC Spo
Connected	Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify	Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Spo
Connected Designated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee by name, address (phone number – optional) CITY CITY		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Organization Affiliated Committee Joint Joint by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or mails after the property of the pository, etc.	Organization Affiliated Committee Joint Joint by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A	ZIP CODE A

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

5(g) c	or(h). Joint Fundraisin ç	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	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 2485		
		SPRINGFIELD	, VA	22152
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected		Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		
9.	Full Name Mailing Address TITLE OR POSITION	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Tele ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative,	or Leadership PAC Sponsor
	JEANNE VICTOR	Y FUND		
		PO BOX 30844		
	Mailing Address			
		BETHESDA		20824
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representat	ive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		
8.	Full Name	CITY A	STATE ▲	
	Full Name Mailing Address TITLE OR POSITION	CITY A Tes: List all banks or other depositories in which	STATE ▲	ZIP CODE A
	Full Name	CITY A CITY A ries: List all banks or other depositories in which intains funds.	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank,	CITY A CITY A ries: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching and the pository, etc.	CITY A CITY A ries: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching and the pository, etc.	CITY A CITY A ries: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A

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

h). Joint Fundraisi r			, , FE	C ID number	
2.			 , , FE(C ID number	С
			 FE(C ID number	С
3.				C ID number	С
4.				o ib namber	<u> </u>
ame of Any Connected	Organization, Aff	filiated Committee, Jo	int Fundraising	Representativ	ve, or Leadership PAC Spor
OBERWEIS VICT	TORY COMM	IITTEE			
	DO DOV 2004				
Mailing Address	PO BOX 30844	1			
	BETHESDA			MD	20824
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connecte	d Organization y by name, addres	Affiliated Committee ss (phone number – op	Joint Fundra	ising Represen	tative Leadership PAC S
esignated Agent: Identif				ising Represen	tative Leadership PAC S
esignated Agent: Identif				ising Represen	Leadership PAC S
esignated Agent: Identif				ising Represent	Leadership PAC S
esignated Agent: Identif	y by name, addres	ss (phone number – op	otional)		
esignated Agent: Identif	y by name, addres	ss (phone number – op	otional)	state A	
esignated Agent: Identif Full Name Mailing Address	y by name, addres	ss (phone number – op	otional)		
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, addres	ss (phone number – op	otional) Telephon	STATE A e Number	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	y by name, addres	ss (phone number – op	otional) Telephon	STATE A e Number	
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, addres	ss (phone number – op	otional) Telephon	STATE A e Number	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, addres	ss (phone number – op	otional) Telephon	STATE A e Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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g) or (h). Joint Fundraisi	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	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		
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ Tel ories: List all banks or other depositories in which telepositories in which it was a proper which it which it which it was a proper which it was a proper which it was a proper	STATE ▲	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or make the safety deposit b	CITY ▲ CITY ▲ Tel ories: List all banks or other depositories in which telepositories in which it was a proper which it which it which it was a proper which it was a proper which it was a proper	STATE ▲	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposits safety deposit boxes or management of Bank, Depository, etc.	CITY ▲ CITY ▲ Tel ories: List all banks or other depositories in which telepositories in which it was a proper which it which it which it was a proper which it was a proper which it was a proper	STATE ▲	ZIP CODE A

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

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h). Joint Fundraising	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 of	Organization, Affiliated Com	mittee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 30844			
	BETHESDA		MD	20824
Relationship:	CIT	Y A	STATE ▲	ZIP CODE ▲
Connected				
	Organization Affiliated Companization Affiliated Affiliat		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify Full Name	_		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify	_		Fundraising Represent	Leadership PAC S
esignated Agent: Identify Full Name	_		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify Full Name	_	ımber – optional)		
esignated Agent: Identify Full Name	by name, address (phone nu	umber – optional)		Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone nu	Imber – optional)		
Full Name Mailing Address TITLE OR POSITION	by name, address (phone nuclearly continued by name, address (phon	Imber – optional)	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (phone nuclearly continued by name, address (phon	Imber – optional)	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (phone nuclearly continued by name, address (phon	Imber – optional)	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone nuclearly continued by name, address (phon	Imber – optional)	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone nuclearly continued by name, address (phon	Imber – optional)	STATE A lephone 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
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
STEEL VICTOR	Y FUND		
Mailing Address	9070 IRVINE CENTER DRIVE #150		
			1 1 1 1 1 1 1 1 1
	IRVINE	CA	92618
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.	Name of Any Connected SMUCKER VICTO	Organization, Affiliated Committee, Joint Fundon	draising Representati	ve, or Leadership PAC Sponsor
	Mailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	GA GA	30605
	Relationship:	CITY A	STATE 4	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	nt Fundraising Represer	tative Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			Telephone Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in whic intains funds.	h the committee depos	its funds, holds accounts, rents
	Name of Bank, Depository, etc.			
	Mailing Address			
		CITY ▲	STATE ▲	ZIP CODE ▲

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

h). Joint Fundraisi	ig i ai tioipairt.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TEAM JOYCE FO	OR PENNSYLVANIA		
	201.011117207117		
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee Join	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	by by name, address (phone number – optional)	STATE	
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 To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

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(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 Fund	raising Representativ	e, or Leadership PAC Spons
DIG DAN KODIIV	LI VICTORY COMMITTEE		
Mailing Address	50 S JONES BLVD STE 201		
	LAS VEGAS	, , NV	89107
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif		t Fundraising Represent	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	Ative Leadership PAC Spo
Connecte Designated Agent: Identif	Affiliated Committee y Join y by name, address (phone number – optional) CITY		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y Join fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	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 Committee y Join fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposited safety deposit boxes or make the content of Bank,	Affiliated Committee y Join fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	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 Committee y Join fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

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1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
HOUSE VICTOR	Y FUND		
<u> </u>			
	2318 CURTIS STREET		
Mailing Address	2316 CURTIS STREET		
	DENVER	CO	80205
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee Solution	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t 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)	t Fundraising Represent	

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

h). Joint Fundraisin		[[0	ID number	
1.				
2.		FEC	ID number	С
3.		FEC	ID number	C
4.		FEC	ID number	C
	Organization, Affiliated Committee,	Joint Fundraising R	epresentativ	e, or Leadership PAC Spon
NANCY MACE VI	CTORY FUND			
Mailing Address	228 S. WASHINGTON ST.			
	STE. 115			
	ALEXANDRIA	, , , , , , , ,	VA	22314
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connected		y Joint Fundrais	ing Represent	ative Leadership PAC S
	Organization Affiliated Committee by name, address (phone number –	_	ing Represent	ative Leadership PAC S
	Organization Affiliated Committee		ing Represent	ative Leadership PAC S
esignated Agent: Identify	Organization Affiliated Committee		ing Represent	Leadership PAC S
esignated Agent: Identify Full Name	Organization Affiliated Committee		ing Represent	Leadership PAC S
esignated Agent: Identify Full Name	Organization Affiliated Committee	optional)		
esignated Agent: Identify Full Name	Organization Affiliated Committee by name, address (phone number –	optional)	ing Represent	
esignated Agent: Identify Full Name	Organization Affiliated Committee by name, address (phone number –	optional)	STATE A	
Full Name Mailing Address	Organization Affiliated Committee by name, address (phone number – CITY CITY ies: List all banks or other depositori	optional) Telephone	STATE A Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main	Organization Affiliated Committee by name, address (phone number – CITY CITY ies: List all banks or other depositori	optional) Telephone	STATE A Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	Organization Affiliated Committee by name, address (phone number – CITY CITY ies: List all banks or other depositori	optional) Telephone	STATE A Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or main arms of Bank, epository, etc.	Organization Affiliated Committee by name, address (phone number – CITY CITY ies: List all banks or other depositori	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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1					
2.			FEC I	D number	С
			FEC I	D number	С
3.			FEC I	D number	С
4.			FEC I	D number	С
		Affiliated Committee, Joint	Fundraising Re	presentativ	ve, or Leadership PAC Spon
VICTORIA VICTO	ORY FUND			1 1 1 1	
				1 1 1 1	
	924 C MILL FI	DOE AVE STE 101			
Mailing Address	624 S WILLET	DGE AVE STE 101			
	ATHENS			GA	30605
Relationship:		CITY ▲		STATE A	ZIP CODE ▲
esignated Agent: Identi	ify by name, addre	/			
Full Name		ess (pnone number – optior	nal)	1 1 1 1	
		ess (pnone number – option	nal)	1 1 1 1	
Full Name		ess (pnone number – optior	nal)		
		ess (pnone number – optior	nal)		
Mailing Address			nal)	STATE A	7IP CODE A
			Telephone N	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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1.		FEC ID no.	umber C	
3.		FEC ID nu		
		_	ımber C	
4.	_			
		FEC ID no	umber C	
Name of Any Connected C FRANKLIN VICTO	Organization, Affiliated Committee, Joint Fu	undraising Repres	entative, or	Leadership PAC Sponsor
TRAINCEIN VIOLO				
Mailing Address	P.O. BOX 2811			
	LAKELAND		FL _	33806
Relationship:	CITY ▲	S	TATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	Joint Fundraising Re	presentative	Leadership PAC Spons
Pull Name	by name, address (phone number – optional)		
Mailing Address				
TITLE OR POSITION •	▼ CITY ▲	STA	TE 🛦	ZIP CODE ▲
		Telephone Numb	per	
Banks or Other Depositoric safety deposit boxes or main	ies: List all banks or other depositories in what ntains funds.	nich the committee	deposits fun	nds, holds accounts, rents
Name of Bank, Depository, etc.				
Depository, etc.	 			
Depository, etc.				

FEC Form 1S (Revised 02/2017)

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(h). Joint Fundraisin		FEC ID number	С
		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		PEC ID Hullibel	O
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
UNITED TO WIN			
Marilia a Aalaha aa	PO BOX 9891		
Mailing Address			
	ARLINGTON		22219
		VA	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	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 Depositor afety deposit boxes or maintenance.	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
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Full Name	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

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	Connected	d Organization	Affiliated Committee	Joint Fund	raising Hepresent	ative	Leadership PAC Spo
	Connected	d Organization	Affiliated Committee	✗ Joint Fund	raising Represent	ative	Leadership PAC Spo
	Relationship:		CITY ▲		STATE A		ZIP CODE A
	Relationship:		CITY A		STATE A		ZIP CODE ▲
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		LITTLE ROCK				12217	
		LITTLE ROCK				12217	
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	Deletienelie						
		LITTLE ROCK				12217	
		LITTEE ROOK				12217	
		LITTLE ROCK				/221/	
		LITTLE ROOK					
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		LITTEE ROOK					
		LITTEE ROOK				12217	
		LITTEE ROOK					
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	Deletienshim		OIT) (:				710 0005 :
	Relationship:		CITY A		STATE A		ZIP CODE ▲
	Relationship:		CITY A		STATE A		ZIP CODE A
Design	nated Agent: Identify	, hy name address	s (phone number – opi	tional)			
Desigi	nated Agent: Identify	by name, address	s (priorie number – opi	lionai)			
Fu	ull Name			1 1 1 1 1			
Ma	ailing Address						
IVIC	alling Address						
		1					
			CITY A		STATE A		ZIP CODE A
Т	TITLE OR POSITION	-	CITY A				ZIP CODE A
Т	TITLE OR POSITION	<u> </u>	CITY A				ZIP CODE A
T	TITLE OR POSITION	U	CITY A		STATE A		ZIP CODE A
T	TITLE OR POSITION		CITY A	Tolonbo			ZIP CODE A

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

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TITLE OR POSITION TEC ID number C Analysis or Other Depositories: List all banks or other depositories in which the committee deposits further bank, epository, etc. Mailing Address FEC ID number C FEC ID	
3. 4. FEC ID number C Affiliated Committee, Joint Fundraising Representative, or MANN VICTORY FUND Mailing Address PO BOX 1084 SALINA Relationship: CITY ▲ STATE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ Telephone Number Talephone Number Talephone Number Talephone Number Talephone Number Anaks or Other Depositories: List all banks or other depositories in which the committee deposits further depository, etc.	
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or MANN VICTORY FUND Mailing Address PO BOX 1084 STATE ▲ STATE ▲ Connected Organization	
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, of MANN VICTORY FUND Mailing Address PO BOX 1084 Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative STATE ▲ STATE ▲ STATE ▲ Telephone Number TITLE OR POSITION ▼ CITY ▲ STATE ▲ Telephone Number	
MANN VICTORY FUND Mailing Address PO BOX 1084 SALINA Relationship: CITY ▲ STATE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits further depository, etc.	
Mailing Address PO BOX 1084 SALINA Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TiTLE OR POSITION ▼ CITY ▲ STATE ▲ Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits furtify deposit boxes or maintains funds. ame of Bank, epository, etc.	r Leadership PAC Spon
Relationship: CITY ▲ STATE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits furtherly deposit boxes or maintains funds. anne of Bank, appository, etc.	
Relationship: CITY ▲ STATE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits furtherly deposit boxes or maintains funds. anne of Bank, appository, etc.	
SALINA STATE ▲ Connected Organization Affiliated Committee STATE ▲ Joint Fundraising Representative esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits furtifety deposit boxes or maintains funds. ame of Bank, epository, etc.	
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative assignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY STATE Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits funditely deposit boxes or maintains funds.	
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative assignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY STATE Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits funditely deposit boxes or maintains funds.	, 67402
Connected Organization	
Paignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ Telephone Number	ZIP CODE ▲
Mailing Address CITY ▲ STATE ▲ Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits further depository, etc.	
TITLE OR POSITION ▼ CITY ▲ Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits function of Bank, epository, etc.	
TITLE OR POSITION CITY Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits furtherly deposit boxes or maintains funds. Telephone Number Telephone Number	
TITLE OR POSITION CITY Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits furtherly deposit boxes or maintains funds. Telephone Number Telephone Number	
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anks or Other Depositories: List all banks or other depositories in which the committee deposits further deposit boxes or maintains funds. The property of Bank, expository, etc.	ZIP CODE ▲
afety deposit boxes or maintains funds. ame of Bank, epository, etc.	
ame of Bank, epository, etc.	ınds, holds accounts, ren
epository, etc.	
Mailing Address	

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

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fo	undraising Representativ	e, or Leadership PAC Spon
LATURNER VIC	TORY FUND		
<u> </u>			
	PO POM 27027		
Mailing Address	PO BOX 67237		
	TOPEKA	KS	66667
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
- -			
Connecte		Joint Fundraising Represent	tative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee		tative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee		tative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee		tative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee		tative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee fy by name, address (phone number – optiona		
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee fy by name, address (phone number – optiona		
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee fy by name, address (phone number – optiona	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite	Affiliated Committee fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in wheel of the committee of the	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market.	Affiliated Committee fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in wheel of the committee of the	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	Affiliated Committee fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in wheel of the committee of the	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	Affiliated Committee fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in wheel of the committee of the	STATE A Telephone Number	ZIP CODE A
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 fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in wheel of the committee of the	STATE A Telephone Number	ZIP CODE A
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 fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in wheel of the committee of the	STATE A Telephone Number	ZIP CODE A

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

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Claudia Tenney f	or Congress Victory Fund		
Mailing Address	PO BOX 244		
	CLINTON	NY	13323
Relationship:	CITY 🛦	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	: Fundraising Represent	ative Leadership PAC Sp
		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Page 115 of 199

TY FUND 31 LINWOOD CT IRMINGHAM CITY	STATE A STATE A STATE A Telephone Number	ZIP CODE A
TY FUND 31 LINWOOD CT IRMINGHAM CITY anization Affiliated Committee CITY List all banks or other depositories in when the committee in the committee i	STATE A STATE A STATE A Telephone Number	ZIP CODE A ative Leadership PAC S
TY FUND 31 LINWOOD CT IRMINGHAM CITY anization Affiliated Committee CITY List all banks or other depositories in when the committee in the committee i	STATE A STATE A STATE A Telephone Number	ZIP CODE A ative Leadership PAC S
TY FUND 31 LINWOOD CT IRMINGHAM CITY anization Affiliated Committee CITY List all banks or other depositories in when the committee in the committee i	STATE A STATE A STATE A Telephone Number	ZIP CODE A ative Leadership PAC S
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TY FUND 31 LINWOOD CT IRMINGHAM CITY anization Affiliated Committee	AL STATE ▲	ZIP CODE A
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TY FUND 31 LINWOOD CT IRMINGHAM CITY	AL STATE A	ZIP CODE A
TY FUND 31 LINWOOD CT IRMINGHAM	AL	
TY FUND 31 LINWOOD CT	ndraising Representative	
TY FUND	ndraising Representative	
TY FUND	ndraising Representative	
	ndraising Representative	
	ndraising Representative	
		e, or Leadership PAC Spon
	J 20 15 Hamber	
	J	C
	J	C
	FEC ID number	
		FEC ID number FEC ID number FEC ID number

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

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h). Joint Fundraisi r	3		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 7208		
	KINGSPORT	TN	37664
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee y Joint y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee y Joint y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

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h). Joint Fundraisi			. FFC	ID number	C
1.				ID number	-1 - 1 - 1 - 1 - 1
2.					С
3.			FEC	ID number	С
4			FEC	ID number	C
ame of Any Connected	Organization, Aff	iliated Committee, Joir	nt Fundraising R	epresentativ	e, or Leadership PAC Spon
GUS BILIRAKIS	VICTORY FUI	ND			
Mailing Address	PO BOX 2485				
	SPRINGFIELD			_ VA _ ⊥	22152
Relationship:		CITY ▲		STATE A	ZIP CODE ▲
Connecte	d Organization	Affiliated Committee	X Joint Fundrais	ng Represent	tative Leadership PAC S
	d Organization		Joint Fundrais	ng Represent	tative Leadership PAC S
Connecte esignated Agent: Identif				ng Represent	tative Leadership PAC S
esignated Agent: Identif				ng Represent	Leadership PAC S
esignated Agent: Identif				ng Represent	Leadership PAC S
esignated Agent: Identif	y by name, addres		ional)	ng Represent	Leadership PAC S
esignated Agent: Identif	y by name, addres	s (phone number – opti	ional)	ng Represent	
esignated Agent: Identif Full Name Mailing Address	y by name, addres	s (phone number – opti	ional)	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, addres	cs (phone number – opti	Telephone	STATE A Number	
esignated Agent: Identification Full Name	y by name, addres	cs (phone number – opti	Telephone	STATE A Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, addres	cs (phone number – opti	Telephone	STATE A Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, addres	cs (phone number – opti	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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h). Joint Fundraisin			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	or Leadershin PAC Snon
BIGGS VICTORY		and in grand and in a second a	s, or loadersp 1310 Open
1			
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	I VA	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Organization Affiliated Committee Y Joint by name, address (phone number – optional)	EFundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		EFundraising Representa	Leadership PAC S
esignated Agent: Identify		E Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		E Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
esignated Agent: Identify Full Name	by name, address (phone number – optional)	STATE A	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or ma	by name, address (phone number – optional) CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or material depositions are of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or material depositions are of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Page 119 of 199

anks or Other Depositoral deposit boxes or make of Bank, repository, etc. Mailing Address					
afety deposit boxes or mane of Bank, epository, etc.					
afety deposit boxes or manual ame of Bank,					
		nks or other depositories	s in which the o	committee depos	sits funds, holds accounts, ren
			reieph	one Number	
TITLE OR POSITION	 ▼	5 <u> </u>	Talash		
		CITY A		STATE ▲	ZIP CODE ▲
walling Address					
Mailing Address					
esignated Agent: Identif	y by name, add	ress (phone number – c	ptional)		
Connecte	ed Organization	Affiliated Committee	Joint Fund	draising Represer	ntative Leadership PAC Sp
Relationship:		CITY ▲		STATE 4	ZIP CODE ▲
	HUDSON			WI	54016
Mailing Address	PO BOX 183	3			
WAGNER VICTO	_		oint Fundraisir	ig Hepresentati	ve, or Leadership PAC Spon
		A (11)			
4			F	EC ID number	C
3.			F	EC ID number	С
			 _	EC ID number	С
2.			_	EC ID number	C

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

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1.	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 Spons
Mailing Address	47 FLINTLOCK DR		
	SHIRLEY	NY	11967
		STATE ▲ nt Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Sp
Connecte			
Connecte	ed Organization Affiliated Committee		
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee		
esignated Agent: Identi	Affiliated Committee y Joint fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
Connecte resignated Agent: Identi Full Name	Affiliated Committee Joi fy by name, address (phone number – optional)		

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

Page 121 of 199

1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected TEAM CHENEY	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Mailing Address	3538 SOUTH WAKEFIELD ST.		1 1 1 1 1 1 1 1 1
	ARLINGTON	VA	22206
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	ed Organization Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
ELISE VICTORY	FUND		
Mailing Address	PO BOX 500		
	GLEN FALLS	NY	12801
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
SERVANT LEAD	ERSHIP FUND		
1			
Mailing Address	824 S. MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	st Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY T	STATE A	ZIP CODE A
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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 Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
BICE VICTORY	I Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 21315		
ag / laa.eee			
	OKLAHOMA CITY	, OK	73156
D 1 11 11			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
		t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
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esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Spanish
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name 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 Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

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h). Joint Fundraisi	ng raiticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
GARBARINO VI	CTORY FUND		
I			
Mailing Address	PO BOX 101		
	BAYPORT	NY	11705
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
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h). Joint Fundraisi			FEC	ID number	C
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3.			 _ FEC	ID number	С
4.			FEC	ID number	C
ame of Any Connected BURGESS OWE	_		nt Fundraising R	Representativ	re, or Leadership PAC Spor
BORGESS OWE	INS VICTORT				
Mailing Address	824 S MILLEDG	E AVE STE 101	1 1 1 1 1 1	1 1 1 1	
Ü					
	ATHENS			GA	30605
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connecte	d Organization	Affiliated Committee	Joint Fundrais	sing Represent	tative Leadership PAC S
Connecte	d Organization	Affiliated Committee	X Joint Fundrais	sing Represent	tative Leadership PAC S
		'		ing Represent	tative Leadership PAC S
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esignated Agent: Identif		'		ing Represent	tative Leadership PAC S
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	y by name, address	c (phone number – opti	ional) Telephone	STATE A Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address	c (phone number – opti	ional) Telephone	STATE A Number	ZIP CODE A

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

h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
2022 PHASE 1 P	ATRIOT DAY JFC		
	<u> </u>		
Mailing Address	228 S. WASHINGTON STREET		
Mailing / Marioso	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		t Fundraising Represent	Leadership PAC S
esignated Agent: Identif		t Fundraising Represent	
esignated Agent: Identif Full Name Mailing Address	by by name, address (phone number – optional)		
esignated Agent: Identif	by by name, address (phone number – optional) CITY	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	by by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	TDOCX			
		PO BOX 30844		
	Mailing Address			
		BETHESDA	MD	20824
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive 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	STATE A	ZIP CODE A
8.	Full Name	CITY A		
	Full Name _ _ _ Mailing Address TITLE OR POSITION	CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail. Name of Bank,	CITY CITY Tes: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY CITY Tes: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY CITY Tes: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A

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h). Joint Fundraisir	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 Funda	raising Representative	e, or Leadership PAC Spon
COMER VICTOR	Y FUND		
	228 S. WASHINGTON ST.		
Mailing Address			
	STE. 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Represent	
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
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1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected (WAGNER-MCHEN	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Mailing Address	6269 LEESBURG PIKE		
	B7		
	FALLS CHURCH	VA VA	22044
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	by name, address (phone number - optional)		
Mailing Address			
Mailing Address	CITY A	STATE A	ZIP CODE A
	Y	STATE Gelephone Number	ZIP CODE A
Mailing Address TITLE OR POSITION	v 	elephone Number	
Mailing Address TITLE OR POSITION anks or Other Depositori	res: List all banks or other depositories in which	elephone Number	
Mailing Address TITLE OR POSITION anks or Other Depositori afety deposit boxes or mail	res: List all banks or other depositories in which	elephone Number	
Mailing Address TITLE OR POSITION anks or Other Depositori afety deposit boxes or mail	res: List all banks or other depositories in which	elephone Number	
Mailing Address TITLE OR POSITION Tanks or Other Depositoria fety deposit boxes or main fame of Bank, repository, etc.	res: List all banks or other depositories in which	elephone Number	

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

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h). Joint Fundraisi	ig Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
MACE MAJORIT	Y FUND		
Mailing Address	824 S MILLEDGE AVE		
g	STE. 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	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)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Topries: 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 Topries: 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 Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	I Organization, Affiliated Committee, Joint Fun Y FUND	draising Representativ	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE		
J	STE 101		
	ATHENS	GA	30605
		STATE ▲	ZIP CODE ▲
	CITY ▲ ed Organization	int Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee		Leadership PAC Spo
Connected Agent: Identification Full Name	ed Organization Affiliated Committee		Leadership PAC Sp
Connected Agent: Identification Full Name	ed Organization Affiliated Committee		Leadership PAC Sport
Connected Agent: Identification Full Name	Affiliated Committee Affiliated Committee Journal To the property of the		Leadership PAC Spo
Connected Designated Agent: Identification Full Name Mailing Address	Affiliated Committee Affiliated Committee Journal To the property of the	int Fundraising Represent	
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Type by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	int Fundraising Represent STATE Telephone Number	ZIP CODE A
Connected Pesignated Agent: Identification of Bank, Depository, etc.	Affiliated Committee Affiliated Committee Type by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	int Fundraising Represent STATE Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1. 2. 3. 4. 4. 4. GRANGER VICTO	Organization, Affiliated Committee, Joint Fundament	FEC ID number FEC ID number FEC ID number FEC ID number	C
3. 4. 4. Lame of Any Connected O	Organization, Affiliated Committee, Joint Fun	FEC ID number	С
4	Organization, Affiliated Committee, Joint Fun		
ame of Any Connected O	Organization, Affiliated Committee, Joint Fun	FEC ID number	C
GRANGER VICTO		draising Representative	e, or Leadership PAC Spon
	RY COMMITTEE		
I			
Mailing Address	PO BOX 9891		
	ARLINGTON	VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	by name, address (phone number – optional)		
Full Name	<u> </u>		
Mailing Address			
TITLE OR POSITION \	CITY A	STATE ▲	ZIP CODE ▲
		Telephone Number	
anks or Other Depositorical afety deposit boxes or main ame of Bank, epository, etc.	es: List all banks or other depositories in which ntains funds.	h the committee deposits	s funds, holds accounts, ren
	I		
Mailing Address			

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

(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
MIKE GARCIA VI	CTORY FUND		
Mailing Address	9070 IRVINE CENTER DRIVE #150		
	IRVINE	CA	92618
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify	Affiliated Committee Joint Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Representation	
esignated Agent: Identify	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A

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

h). Joint Fundraisi	ng randopana		
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 Fun	draising Representativ	e, or Leadership PAC Spon
JERRY CARL VI	CTORY COMMITTEE		
<u> </u>			
	PO POV 075400		
Mailing Address	PO BOX 852138		
	MOBILE 	AL	36685
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
_			
Connecte	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC S
		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee Joint	int Fundraising Represent	ative Leadership PAC S
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esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	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 Deposit afety deposit boxes or mainly and the second seco	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
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ng Participant:		
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	raising Representative	e, or Leadership PAC Spon
TEAM MOORE S	JOINT FUNDRAISING COMMITTEE		
	1 370 EAST SOUTH TEMPLE STE 580		
Mailing Address			
	SALT LAKE CITY	UT	84111
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	Leadership PAC S
esignated Agent: Identi	Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi	ify by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optional) CITY		
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esignated Agent: Identification Full Name	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi		FEC ID number	C
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e. or Leadership PAC Spon
PFLUGER VICTO	-		
1			
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC Sp
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
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h). Joint Fundraisi	1	EEO ID	С
1.		FEC ID number	
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3.		FEC ID number	C
4		FEC ID number	C
=	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
NEHLS VICTOR	Y 		
Mailing Address	1612 CRABB RIVER RD		
	RICHMOND	TX L	77469
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	Affiliated Committee	t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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	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 RONNY			· · · · · · · · · · · · · · · · · · ·
Mailing Address	PO BOX 51522		
	AMARILLO	TX	79159
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	
Designated Agent: Identif			
Designated Agent: Identif			
Designated Agent: Identif			
Designated Agent: Identification Full Name Mailing Address	by name, address (phone number – optional)		ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional)		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or make the period of Bank, Depository, etc.	ries: List all banks or other depositories in whitintains 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 whitintains funds.	STATE A Telephone Number ch the committee deposit	ZIP CODE A

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h). Joint Fundraisi r	ig i artioipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
TONY GONZALE	S VICTORY FUND		
<u> </u>			
	. 12000 STARCREST DR		
Mailing Address	12000 STARCREST DR		
	STE 101		
	SAN ANTONIO		78247
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	
esignated Agent: Identif	y by name, address (phone number – optional)		
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) CITY		
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposited afety deposit boxes or mail	y by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposited afety deposit boxes or mails are of Bank,	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

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	C
3.		FEC ID number	C
4		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
SHEDD VICTOR	Y FUND		
Mailing Address	PO BOX 365		
	MCLEAN	VA VA	22101
Relationship:	CITY ▲	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	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
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 A Telephone Number	es funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or material states. Some safety deposit boxes or materials and safety deposit boxes or materials.	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 main safety deposit boxes or main safety depository, etc.	CITY A cites: 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

n). Joint Fundraising			1	FFC ID		
1.				FEC ID number		-
2.				FEC ID number		-
3.				FEC ID number	C	_
4.				FEC ID number	C	
ame of Any Connected C		iated Committee,	Joint Fundra	ising Representati	ve, or Leadership PAC	Spor
ISSA VICTORY FU	JND 					
Mailing Address	9070 IRVINE CE	NTER DRIVE				
	SUITE 150					
	IRVINE			CA CA	92618	
Relationship:		CITY A		STATE A	ZIP COD	E 🛦
	Organization	Affiliated Committee	y Joint F	Fundraising Represer	ntative Leadership I	
Connected esignated Agent: Identify				Fundraising Represer	ntative Leadership I	
Connected				Fundraising Represer	ntative Leadership I	
Connected esignated Agent: Identify				Fundraising Represer	Leadership I	
Connected esignated Agent: Identify Full Name				Fundraising Represer	Leadership I	
Connected esignated Agent: Identify Full Name	by name, address		optional)		Leadership I	PAC S
Connected esignated Agent: Identify Full Name	by name, address	(phone number –	optional)			PAC S
Connected esignated Agent: Identify Full Name Mailing Address	by name, address	s (phone number –	optional)			PAC S
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or main ame of Bank,	by name, address	city A	optional)	STATE A	ZIP CODE	PAC S
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or main	by name, address	city A	optional)	STATE A	ZIP CODE	PAC S
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or main ame of Bank,	by name, address	city A	optional)	STATE A	ZIP CODE	PAC S
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or mail ame of Bank, epository, etc.	by name, address	city A	optional)	STATE A	ZIP CODE	PAC S

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

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	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 Fund	draising Representative	e, or Leadership PAC Sponse
Mailing Address	75 S HIGH ST		
	STE. 4		
	DUBLIN	OH	43017
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agents Identif	, by name, address (phone number, entional)		
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 A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A	Telephone Number	

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

(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
HOUSE MAJOR	ITY TRUST		
Matter Address	228 S WASHINGTON STREET SUITE 115		
Mailing Address			
	ALEXANDRIA		00044
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect		oint Fundraising Represent	ative Leadership PAC Spo
Connect	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connect Designated Agent: Ident	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X J		Leadership PAC Spo
Connect Designated Agent: Ident Full Name Mailing Address	ed Organization Affiliated Committee X J		
Connect Designated Agent: Ident Full Name Mailing Address	ed Organization Affiliated Committee X J	STATE A	
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit	ed Organization Affiliated Committee ify by name, address (phone number – optional) CITY CITY cories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or necessity.	ed Organization Affiliated Committee ify by name, address (phone number – optional) CITY CITY cories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit	ed Organization Affiliated Committee ify by name, address (phone number – optional) CITY CITY cories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Depositions deposit boxes or not be supposed to the position of Bank,	ed Organization Affiliated Committee ify by name, address (phone number – optional) CITY CITY cories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or not be and a proposition of Bank, Depository, etc.	ed Organization Affiliated Committee ify by name, address (phone number – optional) CITY CITY cories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or not be and a proposition of Bank, Depository, etc.	ed Organization Affiliated Committee ify by name, address (phone number – optional) CITY CITY cories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A

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

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h). Joint Fundraisi	ng Participant:	550 ID	C
1.		FEC ID number	-1 - 1 - 1 - 1
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
WOMACK MAJO	PRITY FUND		
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connoct	ad Organization Affiliated Committee	t Fundraising Danrasant	
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	rundraising Representa	Leadersnip PAC S
esignated Agent: Identi		rundraising Representa	Leadersnip PAC S
esignated Agent: Identi		Pundraising Representation	Leadersnip PAC S
esignated Agent: Identi		Trundraising Representation	Leadersnip PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
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 To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY To 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

Page <u>146</u> **of** <u>199</u>

h). Joint Fundraisir	•		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition of Bank, epository, etc	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition of Bank, epository, etc	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A

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(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 C	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
Mailing Address	8505 TECHNOLOGY FOREST PLACE		
	SUITE 702		
	THE WOODLANDS	TX	77381
Deletionship	CITY ▲	STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sp
Connected		nt Fundraising Representa	ative Leadership PAC Spe
Connected Designated Agent: Identify	Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Spe
Connected Designated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee Join by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Special Control of the Code
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee Join by name, address (phone number – optional) CITY		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Organization Affiliated Committee Join by name, address (phone number – optional) CITY es: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorical Stafety deposit boxes or main stafety depository, etc.	Organization Affiliated Committee Join by name, address (phone number – optional) CITY es: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi r		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
7.			
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
TEAM MCHENRY	Y 		
	228 S. WASHINGTON STREET		
Mailing Address			
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or materials and the companion of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or materials and the companion of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

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1. 2. 3. 4. 4. Name of Any Connected ONUNES VICTORY	Organization, Affiliated Committee, Joint	FEC ID number FEC ID number FEC ID number FEC ID number FEC ID number	C C C
3. 4. 4. Lame of Any Connected O	Organization, Affiliated Committee, Joint	FEC ID number	C
4	Organization, Affiliated Committee, Joint	FEC ID number	
lame of Any Connected O	Organization, Affiliated Committee, Joint		C
NUNES VICTORY	ELINID	Fundraising Representative	e, or Leadership PAC Spon
	FUND		
Mailing Address	PO BOX 6545		
	VISALIA	CA	93290
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
esignated Agent: Identify I	by name, address (phone number – option	nal)	
Mailing Address			
	1		1 , , , , , 1-1 , ,
TITLE OR POSITION \	CITY A	STATE ▲	ZIP CODE ▲
		Telephone Number	
anks or Other Depositoric	es: List all banks or other depositories in tains funds.	which the committee deposit	s funds, holds accounts, rent
ame of Bank,	<u>.</u>		
ame of Bank,			
afety deposit boxes or main lame of Bank, pepository, etc. Mailing Address			

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h). Joint Fundraisii		FEC ID number	С
1.		FEC ID number	C
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
NRSC/NRCC VIC	CTORY COMMITTEE		
AA-WAAA	228 S WASHINGTON STREET #115		
Mailing Address			
	ALEXANDRIA	, VA	22314
-			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	draising Representativ	e, or Leadership PAC Spon
HUDSON FREE	OOM FUND		
	228 S WASHINGTON ST STE 115		
Mailing Address			
	ALEXANDRIA	VA VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
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 ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	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: 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 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

Page ____ **of** _____

(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
	d Organization, Affiliated Committee, J DRY COMMITTEE	oint Fundraising R	epresentativ	e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON ST STE 115			
	ALEXANDRIA		VA	22314
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Full Name				
Mailing Address				
TITLE OR POSITIO	CITY ▲		STATE A	ZIP CODE A
TITLE OR POSITION	CITY A	Telephone		ZIP CODE A
Banks or Other Deposit safety deposit boxes or n	ories: List all banks or other depositories naintains funds.	s in which the comr	Number	s funds, holds accounts, rents
Banks or Other Deposit safety deposit boxes or no Name of Bank, Depository, etc.	ories: List all banks or other depositories naintains funds.		Number	s funds, holds accounts, rents
Banks or Other Deposit safety deposit boxes or n	ories: List all banks or other depositories naintains funds.	s in which the comr	Number	s funds, holds accounts, rents
Banks or Other Deposit safety deposit boxes or no Name of Bank, Depository, etc.	ories: List all banks or other depositories naintains funds.	s in which the comr	Number	s funds, holds accounts, rents
anks or Other Deposit afety deposit boxes or n ame of Bank, epository, etc.	ories: List all banks or other depositories naintains funds.	s in which the comr	Number	s funds, holds accounts, rent

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

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(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
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
OOTTVEIRERT			
Mailing Address	228 S WASHINGTON STREET STE 115		
		1 1 1 1 1 1 1	
	ALEXANDRIA		22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
Connecte		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	y by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	y by name, address (phone number – optional) CITY		
Connecte 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 which	STATE A Telephone Number	ZIP CODE A
Connecte Designated 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) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

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h). Joint Fundraisi	.9		
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	raising Representative	e, or Leadership PAC Spon
SCALISE LEADE	RSHIP FUND		
Mailing Address	PO BOX 9891		
	ARLINGTON	VA	22219
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
Connecte		Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representation	Leadership PAC Sp
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee Y Joint Ty by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
Connecte esignated Agent: Identif	Affiliated Committee Y Joint Ty by name, address (phone number – optional) CITY		
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 Y Joint To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	Affiliated Committee Y Joint To pries: List all banks or other depositories in which	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 Y Joint To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

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5(g) c	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 MCCAUL VICTOR	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 341027		
		AUSTIN	TX	78734
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	undraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE A
	TITLE OR POSITION	•		ZIP CODE A
9.	Banks or Other Depositor safety deposit boxes or ma	Tele	STATE ▲	
9.	Banks or Other Depositor	Tele	STATE ▲	
9.	Banks or Other Depositor safety deposit boxes or manner of Bank,	Tele	STATE ▲	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	Tele	STATE ▲	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	Tele	STATE ▲	

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

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h). Joint Fundraisi	· ·		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spon
WRIGHT VICTO	XY FUND		
	<u> </u>		
Mailing Address	75 S HIGH ST		
Mailing Address	STE. 4		
	DUBLIN	, OH ,	43017
Dalatianahin			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Joint Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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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.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Page _____ **of** _____

1		FEC	D ID number	С
2.		FEC	D ID number	С
3.		FEC	D ID number	C
4.		FEC	D ID number	С
ame of Any Connected	Organization, Affiliated Committee	Joint Fundraising	Representativ	ve, or Leadership PAC Spon
TEAM BOEBERT	JOINT FUNDRAISING CO	MMITTEE		
Mailing Address	PO BOX 752			
			l co l	81652
	RIFLE			
Relationship:	CITY A		STATE A	
Connected	CITY ▲ I Organization Affiliated Committee			
Connected	CITY A			
Connected	CITY ▲ I Organization Affiliated Committee			
Connected esignated Agent: Identify	CITY ▲ I Organization Affiliated Committee			
esignated Agent: Identify	CITY ▲ I Organization Affiliated Committee			
esignated Agent: Identify	CITY A d Organization Affiliated Committee by name, address (phone number			Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	CITY A d Organization Affiliated Committee by name, address (phone number -			
esignated Agent: Identify	CITY A d Organization Affiliated Committee by name, address (phone number -	- optional)	Sing Represen	Leadership PAC Sp

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

Page 158 of 199

Mailing Address TITLE OR POSITION anks or Other Depositor Deposi	ories: List all bar	CITY Anks or other depositories in w	STATE Telephone Number	ZIP CODE ZIP CODE posits funds, holds accounts, rent
TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	ories: List all bar	CITY A	STATE Telephone Number	ZIP CODE A
TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	ories: List all bar	CITY A	STATE Telephone Number	ZIP CODE A
TITLE OR POSITION	ories: List all bar	CITY A	STATE Telephone Number	ZIP CODE A
			STATE	
			STATE	
Mailing Address				
Mailing Address				
Mailing Address				
Full Name	- ·			
		ress (phone number – optiona		
	d Organization		Joint Fundraising Repre	
Relationship:		CITY A	STAT	
	DUBLIN		ı OF	H 43016
Mailing Address				
Mailing Address	PO BOX 365	3		
FALLON VICTOR		Allillated Committee, Joint F	undraising Kepresent	ative, or Leadership PAC Spon
4.			_ FEC ID numb	per C
J			_ FEC ID numb	per C
3.			_ FEC ID numb	per C
1				

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h). Joint Fundraisi	1	FEC ID number	С
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e. or Leadership PAC Spon
NUNES LEADER	_		.,
	P.O. BOX 6545		
Mailing Address			
	MONTH		00000
	VISALIA	L CA	93290
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation of the second	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identi 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 Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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5(g)	or(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	
	2.		FEC ID number C	
	3.		FEC ID number C	
	4.		FEC ID number C	\Box
6.	Name of Any Connected O		raising Representative, or Leadership PAC Spons	sor
	Mailing Address	PO BOX 630167		
		IRVING	TX 75063	
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲	
	Connected	Organization Affiliated Committee X Joint	t Fundraising Representative Leadership PAC Sp	onsor
8.				
	Designated Agent: Identify	by name, address (phone number - optional)		
	Pull 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 A		
	Full Name	CITY A	STATE A ZIP CODE A	
9.	Full Name	CITY A ies: List all banks or other depositories in which		ts
	Full Name	CITY A ies: List all banks or other depositories in which	elephone Number	ts .
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A ies: List all banks or other depositories in which	elephone Number	ts
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY A ies: List all banks or other depositories in which	elephone Number	ts
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY A ies: List all banks or other depositories in which	elephone Number	ts

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
VICTORY 2022			
	22780 INDIAN CREEK DRIVE, STE 100		
Mailing Address			
	DULLES	VA	20166
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Join Join fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	
esignated Agent: Identi Full Name Mailing Address	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: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY T	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identic Full Name	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Page <u>162</u> **of** <u>199</u>

		<u></u>		-
Mailing Address				
ame of Bank, epository, etc.				
anks or Other Deposito	ories: List all banks or other depositor aintains funds.	ies in which the committee d	eposits tunas, h	iolus accounts, rents
anko ar Othar Dancaia	wise. List all books or other days -	rice in which the committee	longoito funda l	noldo populata versta
		Telephone Numbe	r	
TITLE OR POSITION	▼ CITY ▲	STATI	Ξ ▲	ZIP CODE ▲
Mailing Address				
Full Name				
esignated Agent: Identif	y by name, address (phone number -	- optional)		
Connecte	d Organization Affiliated Committe	e Joint Fundraising Rep	resentative	Leadership PAC Spo
Relationship:	CITY ▲	STA	⊥ L⊥ TE ▲	ZIP CODE ▲
	ATHENS		GA 3060	05
Mailing Address	ST 101			
Moiling Address	824 S MILLEDGE AVE			
FISCHBACH VIC	Organization, Affiliated Committee,	Joint Fundraising Represe	ntative, or Lead	dership PAC Spons
4.				
3.		FEC ID nun		
2.		FEC ID nun		
1		FEC ID nun		-

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h). Joint Fundraisi	1	FFO ID	C
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
HICE FREEDOM	FUND		
Mailing Address	2470 DANIELLS BRIDGE ROAD		
	SUITE 121		
	ATHENS	GA GA	30606
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

Page ____ **of** _____

5(g)	or(h). Joint Fundraisin ç	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 Fundra	ising Representative	e, or Leadership PAC Sponsor
	ADAM KINZINGEI	R - FUTURE 1ST COMMITTEE		
	Mailing Address	P.O. BOX 2381		
		OTTAWA	IL	61350
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)	1 1 1 1 1 1 1	
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A Tel Ties: List all banks or other depositories in which t	STATE A	ZIP CODE 🛦
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A Tel Ties: List all banks or other depositories in which t	STATE A	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A Tel Ties: List all banks or other depositories in which t	STATE A	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A Tel Ties: List all banks or other depositories in which t	STATE A	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A Tel Ties: List all banks or other depositories in which t	STATE A	ZIP CODE 🛦

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

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h). Joint Fundraisir	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
EMMER VICTOR	Y COMMITTEE		
	2010 1011 100 1011		
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
_			
Connecte	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee July July by name, address (phone number – optional)		ative Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	STATE A	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A

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1					
2.			FEC ID	number	C
			FEC ID	number	С
3.			FEC ID	number	С
4			FEC ID	number	C
Name of Any Conno		Affiliated Committee, Joint I	Fundraising Rep	resentative	e, or Leadership PAC Spons
Mailing Addres	332 W. LEE	HIGHWAY			
	#303				
	WARRENT	ON		VA	20186
				STATE A	ZIP CODE ▲
	nnected Organization	CITY A Affiliated Committee	Joint Fundraising		
Cor Designated Agent: I Full Name	-	Affiliated Committee			
Cor Designated Agent: I	-	Affiliated Committee			
Cor Designated Agent: I Full Name	-	Affiliated Committee			
Cor Designated Agent: I Full Name	-	Affiliated Committee	al)	Representa	Leadership PAC Spo
Cor Designated Agent: I Full Name	Identify by name, add	Affiliated Committee	al)		

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5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	TAKE BACK THE	HOUSE 2020		
	Mailing Address	PO BOX 30844		
		I		
		BETHESDA	, MD I	20824
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	П.			
	Connected	Affiliated Committee X Joint	Fundraising Representa	tive 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	STATE A	ZIP CODE A
8.	Full Name	CITY A		
	Full Name _ _ _ Mailing Address TITLE OR POSITION	CITY A Te	STATE A	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY A Te	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 ries: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY A ries: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY A ries: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A

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anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.		or other depositories in v	which the comm	ittee deposi	ts funds, holds accounts, ren
			Telephone N	lumber	
TITLE OR POSITION	▼	CITY A		STATE A	ZIP CODE ▲
Mailing Address					
Full Name					
	d Organization y by name, address	Affiliated Committee s (phone number – option	Joint Fundraisin	g Represent	ative Leadership PAC Sp
Relationship:	_	CITY ▲	1	STATE ▲	ZIP CODE ▲
5	NASHVILLE			L TN	37205
	SUITE 207				
Mailing Address	95 WHITE BRID	OGE RD			
FRIENDS OF BU	RCHETT				
ame of Any Connected	Organization, Affi	liated Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spon
4			FEC II	O number	C
3			FEC II	O number	С
2.			FEC II	O number	C
I			_	O number	C

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
Name of Any Connected	l Organization, Affiliated Committee, Joint F	undraising Representativ	ve, or Leadership PAC Spons
KELLER VICTOR	RY COMMITTEE		
	⊥ 4031 THICKET LANE		
Mailing Address	1307 11101121 21112		
	HARRISBURG	PA PA	17110
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee X fy by name, address (phone number – optional	Joint Fundraising Represen	Leadership TAO Ope
		-	Leadership TAO Ope
Designated Agent: Identi		-	Leadership TAO Opc
Designated Agent: Identi		-	Leadership TAO Opc
Designated Agent: Identi		-	tative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional	-	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional	al)	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional distributions). CITY	STATE A	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional state of the control	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name Mailing Address TITLE OR POSITION Mailing Address Banks or Other Deposit Eafety deposit boxes or mailing and mailing Address	fy by name, address (phone number – optional state of the control	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional content of the conten	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or make the saf	fy by name, address (phone number – optional content of the conten	STATE Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name	fy by name, address (phone number – optional content of the conten	STATE Telephone Number which the committee depos	ZIP CODE A
Pesignated Agent: Identification Full Name	fy by name, address (phone number – optional content of the conten	STATE Telephone Number which the committee depos	ZIP CODE A

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5(g) c	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	22780 INDIAN CREEK DR.		
		DULLES	, , VA	20166
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected		undraising Represent	
8.		by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	1	1		
		Tele	phone Number	
	safety deposit boxes or ma	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
	safety deposit boxes or ma	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which th		s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which th		s funds, holds accounts, rents

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

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5(g) c	or(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	ASHLET HINSON	TVICTORT COMMITTEE		
	Mailing Address	P.O. BOX 341027		
		AUSTIN	TX	78734
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Affiliated Committee X Joint I	Fundraising Representa	ative Leadership PAC Sponsor
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 A	STATE A	ZIP CODE A
3.	Full Name	CITY 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	STATE ▲ ephone Number	ZIP CODE A
).	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲ ephone Number	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	STATE ▲ ephone Number	ZIP CODE A
).	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
).	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A

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

Page ____ **of** _____

5(g) c	or(h). Joint Fundraisi n	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 WIN IN 2020	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	320 FIRST STREET SOUTHEAST		
		WASHINGTON	DC DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		d Organization Affiliated Committee X Joint	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number – optional)		
8.	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	
8. 9.	Full Name Mailing Address TITLE OR POSITION	CITY CITY Te	lephone Number	ZIP CODE 🛦
	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 🛦

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

Page ____ **of** _____

(h). Joint Fundrais	ing Farticipant.		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fundon	draising Representativ	e, or Leadership PAC Spons
Mailing Address	5132 N PALM AVE		
	NUM 227		
	FRESNO	CA	93704
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ted Organization Affiliated Committee Jointify by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Spo
		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Iden		int Fundraising Represent	ative Leadership PAC Spr
Pesignated Agent: Iden		int Fundraising Represent	ative Leadership PAC Spr
Pesignated Agent: Iden		int Fundraising Represent	ative Leadership PAC Spr
Pesignated Agent: Iden	tify by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Spr
Pesignated Agent: Ident Full Name L Mailing Address	tify by name, address (phone number – optional) CITY		
Pesignated Agent: Ident Full Name L Mailing Address	tify by name, address (phone number – optional) CITY	STATE A	
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITIO	tify by name, address (phone number – optional) CITY tories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITIO	tify by name, address (phone number – optional) CITY tories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposite afety deposit boxes or results.	tify by name, address (phone number – optional) CITY tories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name	tify by name, address (phone number – optional) CITY tories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name	tify by name, address (phone number – optional) CITY tories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A

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

Page <u>174</u> **of** <u>199</u>

Banks or Other Depositors of Bank, Depository, etc. Mailing Address	ories: List all bank aintains funds.	s or other depositories in	which the comm	ittee deposit	is tunds, n	olds accounts,	rents
Name of Bank, Depository, etc.	ories: List all bank aintains funds.	s or other depositories in	which the comm	ittee deposit	is tunds, n	olds accounts,	rents
Name of Bank, Depository, etc.	ories: List all bank aintains funds.	s or other depositories in	which the comm	ittee deposit	is funds, n	olds accounts,	rents
safety deposit boxes or m	ories: List all bank aintains funds.	s or other depositories in	which the comm	ittee deposi	is tunas, n	olds accounts,	rents
Banks or Other Depositorsafety deposit boxes or m	ories: List all bank aintains funds.	s or other depositories in	which the comm	ttee deposi	is tunas, n	olds accounts,	rents
THEE SITE OF THOS	· •		Telephone N	lumber			
TITLE OR POSITION		CITY A		STATE A		ZIP CODE A	
			1	1 . 1	1	1 1	
Mailing Address							
Designated Agent: Identif	y by name, addre	ss (phone number – optio	nal)				
Connecte	ed Organization	Affiliated Committee	Joint Fundraisin	g Represent	ative	Leadership PAC	Spo
Relationship:	_	CITY ▲		STATE ▲		ZIP CODE	A
	BETHESDA			MD	2082	24	
Mailing Address	P.O. BOX 3084	44					
Name of Any Connected TAKE BACK THE		ffiliated Committee, Joint LIFORNIA 2020	Fundraising Re	presentativ	e, or Lead	dership PAC Sp	ons
4.				- number	C		_
1				O number O number	C		-
3				O number	C		-
2			FEC II		C		

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

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h). Joint Fundraisi		FEC ID number	C
		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		T LO ID Humber	0
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
TAKE BACK THI	E HOUSE TEXAS 2020		
I			
Mailing Address	P.O. BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
		Tundraising nepresent	Leadership PAC S
esignated Agent: Identi		Tundraising nepresent	Leadership PAC S
esignated Agent: Identi		Tundraising nepresent	Leadership PAC S
esignated Agent: Identi		Tundraising nepresent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mainly and the second s	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected LONG TEAM	l Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
LONG TEAIVI			
Mailing Address	P.O. BOX 3864		
Mailing Address			
	SPRINGFIELD	, MO	1 65808
D. 1. 1.			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY T	STATE A	ZIP CODE A
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: 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 Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

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h). Joint Fundraisi	ig 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 Funda	raising Representative	e, or Leadership PAC Spons
AUSTIN SCOTT	VICTORY FUND		
<u> </u>			
	824 S. MILLEDGE AVENUE		
Mailing Address			
	SUITE 101		
	ATHENS	GA GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Spo
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representa	
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sports ative Leadership PAC Sports ative ZIP CODE
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
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
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	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 m ame 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
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame 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

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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 Fur	ndraising Representativ	e, or Leadership PAC Spon
MAJORITY RISIN	\G 		
<u> </u>			
	P.O. BOX 30844		
Mailing Address	1.0. 50% 30044		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		pint Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		pint Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional)	oint Fundraising Represent	
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposited deposit boxes or management and manag	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
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 pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identii Full Name	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
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	STATE A Telephone Number	ZIP CODE A

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

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h). Joint Fundraisi	ng 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	l Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
TEAM MURPHY			
Mailing Address	PO BOX 97275		
	RALEIGH	NC	27624
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee Join Join Market State of the Affiliated Committee Join Market State of the Affiliated Commit	nt Fundraising Represent	
esignated Agent: Identif	Affiliated Committee Affiliated Committee Figure 1. Join 1.		
esignated Agent: Identii Full Name Mailing Address	Affiliated Committee Affiliated Committee Figure 1. Join 1.	STATE A	
esignated Agent: Identification Full Name	Affiliated Committee Affiliated Committee Typical Distriction Typical Distriction Affiliated Committee Typ	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	Affiliated Committee Affiliated Committee Typical Distriction Typical Distriction Affiliated Committee Typ	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	Affiliated Committee Affiliated Committee Typical Distriction Typical Distriction Affiliated Committee Typ	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	Affiliated Committee Affiliated Committee Typical Distriction Typical Distriction Affiliated Committee Typ	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.	Affiliated Committee Affiliated Committee Typical Distriction Typical Distriction Affiliated Committee Typ	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.	Affiliated Committee Affiliated Committee Typical Distriction Typical Distriction Affiliated Committee Typ	STATE A	ZIP CODE A

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h). Joint Fundraisi	ig 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	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
HUDSON VICTO	RY FUND		
Mailing Address	824 S. MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee Join Ty by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	by by name, address (phone number – optional)	STATE	
esignated Agent: Identif	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	cy by name, address (phone number – optional) CITY CITY Tories: 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,	cy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi n	ig 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 TEAM BUDDY	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
Mailing Address	824 S. MILLEDGE AVE		
Mailing Address	SUITE 101		
	ATHENS	, GA	, 30605
Relationship:			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected		int Fundraising Represent	ative Leadership PAC Sp
Connected	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
Connected esignated Agent: Identify		int Fundraising Represent	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name		int Fundraising Represent	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name		int Fundraising Represent	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	y by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposit boxes or material deposit boxes are deposited.	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposit boxes or material deposit boxes are deposited and the same of Bank,	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY ries: 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). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	С
NORTH TO THE	l Organization, Affiliated Committee, Joint Fun FUTURE	draising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 2814		
	SEWARD	AK	99664
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connected Agent: Identification Full Name	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connected Agent: Identification Full Name	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connected Agent: Identification Full Name	Affiliated Committee Affiliated Committee y Journal fy by name, address (phone number – optional)		ative Leadership PAC Spo
Connected Designated Agent: Identification Full Name Mailing Address	Affiliated Committee Affiliated Committee y Journal fy by name, address (phone number – optional)	int Fundraising Represent	
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Type by name, address (phone number – optional) CITY CITY CITY Ories: List all banks or other depositories in which	int Fundraising Represent STATE Telephone Number	ZIP CODE A
Connected Pesignated Agent: Identification of Bank, Depository, etc.	Affiliated Committee Affiliated Committee Type by name, address (phone number – optional) CITY CITY CITY Ories: List all banks or other depositories in which	int Fundraising Represent STATE 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
•	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
KUSTOFF VICTO	ORY FUND		
	1661 AARON BRENNER DR		
Mailing Address			
	SUITE 300		
	MEMPHIS	TN	38120
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	fy by name, address (phone number – optional)	t Fundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Hepresenta	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	ZIP CODE A
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mainly and the control of the con	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

(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
	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
MALLIOTAKIS V	ICTORY COMMITTEE		
	PO BOX 68		
Mailing Address			
	SOUTH SALEM	NY NY	10590
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi	ify by name, address (phone number – optional)	STATE	
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optional)	STATE A	
esignated Agent: Identi 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: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or market	ify by name, address (phone number – optional) 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,	ify by name, address (phone number – optional) 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,	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite after deposite boxes or mame 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)

5(g) or (h). Joint Fundr	raising 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 Conne WIN THE FUT	ected Organization, Affiliated Committee, Joint F	undraising Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 2485		
	SPRINGFIELD	VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Conr	nected Organization Affiliated Committee	Joint Fundraising Representa	ative Leadership PAC Sponsor
B. Designated Agent: Id	dentify by name, address (phone number – optiona	l)	
	dentify by name, address (phone number – optiona	i)	
Full Name	dentify by name, address (phone number – optional	i)	
Full Name	dentify by name, address (phone number – optional		
Full Name L	CITY		ZIP CODE A
Full Name	CITY		
Full Name Mailing Address TITLE OR POSIT	TION ▼ CITY ▲ cositories: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITION Banks or Other Depresafety deposit boxes of Name of Bank, Depository, etc.	TION ▼ CITY ▲ cositories: List all banks or other depositories in wor maintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSIT	TION ▼ CITY ▲ cositories: List all banks or other depositories in wor maintains funds.	STATE A Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITION Banks or Other Depresafety deposit boxes of Name of Bank, Depository, etc.	TION ▼ CITY ▲ cositories: List all banks or other depositories in wor maintains 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	ing ranticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	l Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
WESLEY HUNT	VICTORY FUND		
Mailing Address	PO BOX 341027		
	AUSTIN	TX	78734
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Spo
		nt Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		nt Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
Pesignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	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 – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Agents or Other Deposite Safety deposit boxes or make the sa	fy by name, address (phone number – optional) CITY CITY pries: 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 Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	fy 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)

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
	4.			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint F RY FUND	undraising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	824 S MILLEDGE AVENUE		
		SUITE 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optiona	1)	
			,	
	Full Name		,	
	Full Name _ _ _ Mailing Address		, 	
	Mailing Address	CITY A		ZIP CODE A
		CITY A	STATE A	ZIP CODE A
	Mailing Address	CITY A		ZIP CODE A
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY A	STATE A Telephone Number	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY A	STATE A Telephone Number	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A	STATE A Telephone Number	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A	STATE A Telephone Number	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A	STATE A Telephone Number	

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

	g 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 Fundr	raising Representative	e, or Leadership PAC Spons
HIGGINS VICTOR	RY COMMITTEE		
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name			
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name Mailing Address TITLE OR POSITION	CITY A Te	elephone Number	ZIP CODE A
Full Name	CITY A Te	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition are of Bank,	CITY A Te	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or main ame of Bank, epository, etc	CITY A Te	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or main ame of Bank, epository, etc	CITY A Te	elephone Number	ZIP CODE A

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

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
NRCC COLORA	DO VICTORY		
	320 1ST STREET, SE		
Mailing Address	320 101 011 (211, 62		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join Join Join Join Join Join Join Join	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Cries: 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 Cries: 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 Cries: List all banks or other depositories in which	STATE A	ZIP CODE A

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n). Joint Fundraising	, i ai iioipaiiti		,		
1.				EC ID number	С
2.			F	EC ID number	С
3			F	FEC ID number	C
4.			F	FEC ID number	С
		d Committee, Joint	t Fundraisir	ng Representativ	ve, or Leadership PAC Spo
NRCC OREGON V	/ICTORY				
Mailing Address	320 1ST STREET, SI	E			
	WASHINGTON			DC	20003
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connected	Organization Affili	iated Committee	X Joint Fun	draising Represen	tative Leadership PAC
esignated Agent: Identify				draising Represen	tative Leadership PAC S
esignated Agent: Identify Full Name				draising Represen	tative Leadership PAC S
esignated Agent: Identify				draising Represen	Leadership PAC S
esignated Agent: Identify Full Name				draising Represen	tative Leadership PAC S
esignated Agent: Identify Full Name	by name, address (ph		onal)		tative Leadership PAC S
esignated Agent: Identify Full Name	by name, address (ph	none number – optic	onal)		
esignated Agent: Identify Full Name Mailing Address	by name, address (ph	none number – optic	onal)		
Full Name Mailing Address TITLE OR POSITION Anks or Other Depositor fety deposit boxes or main arme of Bank,	by name, address (ph	one number – optic	onal)	STATE A	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or main arme of Bank, epository, etc.	by name, address (ph	one number – optic	onal)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Anks or Other Depositor fety deposit boxes or main arme of Bank,	by name, address (ph	one number – optic	onal)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or main arme of Bank, epository, etc.	by name, address (ph	one number – optic	onal)	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page 191 of 199

h). Joint Fundraisir			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
of A O	Ourseitskien Affiliated Ourseither Leigh Funds	alaina Banna antatin	a an Landaushia BAO Cana
	Organization, Affiliated Committee, Joint Fundr NG VICTORY FUND	aising Representative	e, or Leadership PAC Spon
Mailing Address	824 S MILLEDGE AVE		
. J	SUITE 101		
	ATHENS	, GA	30605
Relationship:	CITY A	STATE A	ZIP CODE A
	OII I =	017112 =	211 0002 =
Connecte		Fundraising Representa	ative Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
Connecte esignated Agent: Identif	Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
Connecte esignated Agent: Identif	Affiliated Committee y Joint y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	Affiliated Committee y Joint y by name, address (phone number – optional) CITY		
Connecte esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y Joint y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftery deposit boxes or mail arms of Bank,	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor affety deposit boxes or material boxes or material boxes or material boxes.	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftery deposit boxes or mail arms of Bank,	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor affety deposit boxes or material boxes or material boxes or material boxes.	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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

1	ng Participant:	FEC ID number	C
1.			-1 - 1 - 1 - 1
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
HISPANIC LEAD	DERSHIP TRUST PARTNERSHIP		
Mailing Address	PO BOX 341027		
	AUSTIN	TX	78734
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
			Leadership FAC C
	ify by name, address (phone number – optional)		Loadership 1 AC C
			Leadership TAO O
esignated Agent: Ident			Leadership TAO O
esignated Agent: Ident			
esignated Agent: Ident			
esignated Agent: Ident	ify by name, address (phone number – optional)		
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 CITY ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY 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 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, repository, etc.	ify by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

5(g) or (h).	Joint Fundraisin	g Participant:		
1.			FEC ID number	С
2. [FEC ID number	С
3. [FEC ID number	С
4. [FEC ID number	C
	of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
N	/Iailing Address	320 1ST STREET, SE		
		WASHINGTON	DC	20003
F	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		by name, address (phone number – optional)		
Full	I Name	by name, address (phone number – optional)		
Full		by name, address (phone number – optional)		
Full	I Name	by name, address (phone number – optional)		
Full Mai	I Name	CITY A	STATE A	ZIP CODE A
Full Mai	I Name	CITY A	STATE A	ZIP CODE A
P. Banks safety of Deposit	I Name	CITY A Tel ries: List all banks or other depositories in which t	lephone Number	

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	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
NRCC ARIZONA	VICTORY		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Spanish
esignated Agent: Identii Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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1.		FEC ID number	C
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3.		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
NRCC CALIFOR	NIA VICTORY		
Martin Addison	228 S. WASHINGTON STREET		
Mailing Address	SUITE 115		
			00044
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Represent	ative Leadership PAC S
Connecte	ed Organization Affiliated Committee Joint Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC S
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ame of Any Connected (Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
NRCC FLORIDA V	'ICTORY		
Mailing Address	228 S. WASHINGTON STREET		
Ü	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	by name, address (phone number – optional)		
Mailing Address			
		1 1 1	
TITLE OR POSITION	CITY A	STATE A	ZIP CODE ▲
TITLE OR POSITION	Y	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

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1.		FEC ID number	С
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4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spons
NRCC NEVADA	VICTORY		
	228 S WASHINGTON ST		
Mailing Address	STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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Connected	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
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esignated Agent: Identify	d Organization Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representation	
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esignated Agent: Identify Full Name Mailing Address	Affiliated Committee y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	Affiliated Committee y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
JOHN JAMES FO	I Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 628		
	ST. CLAIR SHORES	, MI,	1 48080
Relationship:	CITY A	STATE A	ZIP CODE ▲
	10 · · · · V · · · · V · · ·		
	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		t Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi		t Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi		t Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
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Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
DUARTE VICTO	_		
	ı 9460 TEGNER ROAD		
Mailing Address	9400 TEGNER ROAD		
	HILMAR	CA L	95324
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC Sp
	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
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