FEC

Only

STATEMENT OF **ORGANIZATION**

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FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. NRSC 425 2ND STREET NE ADDRESS (number and street) (Check if address is changed) WASHINGTON 20002 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address kbroghamer@nrsc.org is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 30 2025 C00027466 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer BROGHAMER, KRISTI,, BROGHAMER, KRISTI, , , Date 10 30 2025 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	on below.)
(b) This committee is an authorized committee, and is NOT a principal campaign commit information below.)	tee. (Complete the candidate
Name of Candidate	
Candidate Party Affiliation Office Sought: House Senate	President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized com	mittee.
Name of Candidate	
Party Committee:	
(d) This committee is a NAT (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line	e 6.) Its connected organization is as
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 se committee. (i.e., nonconnected committee)	eparate 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 acc	counts (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 procommittees/organizations, at least one of which is an authorized committee of a feder	· ·
(j) This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, none of which is an authorized committee of a federal cand	·
Committees Participating in Joint Fundraiser	
1. [С
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	FEC Form 1 (Revised 0.	2/2009)	Page 3
٧	Vrite or Type Committee Name		
	NRSC		
3.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
	YOUNG VICTORY C	OMMITTEE	
	Mailing Address	PO BOX 3743	
		I	1
		CARMEL IN 46082	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization	Leadership PAC Sponso
7.	Custodian of Records: Identi	fy by name, address (phone number optional) and position of the person in possess	ion of committee
	DDOOUAN	IED KOIOTI	
	Full Name	IER, KRISTI, , ,	
	Mailing Address	425 2ND STREET NE	
		I	1
		WASHINGTON DC 20002	
		WASHINGTON BC 20002	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	TREASURER		675 6000
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the naissistant treasurer).	ame and address of
	Full Name BROGHAN	IER, KRISTI, , ,	
	of Treasurer		
	Mailing Address	425 2ND STREET NE	
			<u> </u>
		WASHINGTON DC 20002	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	TREASURER		675 - 6000

FEC Form 1 (Revised	02/2009)		Page 4
Full Name of Designated BROGHA Agent	AMER, KRISTI, , ,		
Mailing Address	423 ZND STREET NE		
	WASHINGTON	DC	20002
	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position ▼ TREASURER		Telephone number 20:	2 675 - 6000
Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in whintains funds.	nich the committee deposits fur	nds, holds accounts, rents
Name of Bank, Depository,	etc.		
BANK	OF NEVADA		
Mailing Address	8505 CENTENNIAL PKWY		
	LAS VEGAS	NV NV	89148
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Depository,	etc.		
BB&T			
Mailing Address	1909 K STREET NW		
	WASHINGTON	DC	20006
	CITY ▲	STATE ▲	ZIP CODE ▲

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

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	STE. 115					
	STE. 115					
ıip:	ALEXANDRIA				1 1 1 1 1	
ip:				VA	22314	
•		CITY A		STATE ▲	Z	ZIP CODE A
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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 Fur	ndraising Representative	or Leadershin PAC Snons
VANCE VICTORY	Organization, Anniated Committee, Comit Fall		, or Education Price openio
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	, , , , VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte Designated Agent: Identi	Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	
Designated Agent: Identi			
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional)		
Pesignated Agent: Identic Full Name Mailing Address TITLE OR POSITION Mailing Address Banks or Other Deposit Eafety deposit boxes or mailing and mailing and mailing Address	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds. OF AMERICA	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in white aintains funds. OF AMERICA	STATE Telephone Number ch the committee deposit	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:			
1.		FE	EC ID numbe	r C
2.		FE	EC ID numbe	r C
3.		FE	EC ID numbe	r C
4.		FE	EC ID numbe	r C
ame of Any Connected	Organization, Affiliated Committee,	Joint Fundraising	g Representa	tive, or Leadership PAC Spon
RUBIO VICTORY CO	OMMITTEE			
	228 S WASHINGTON STREET SUIT	F 115		
Mailing Address				
	ALEXANDRIA		VA	22314
Relationship:	CITY ▲		STATE	▲ ZIP CODE ▲
	d Organization Affiliated Committee	X Joint Fund	raising Represe	entative Leadership PAC Sp
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esignated Agent: Identification of Bank, epository, etc.	Affiliated Committee by by name, address (phone number – CITY CITY pries: List all banks or other depositorical intains funds.	optional)	STATE A	ZIP CODE A
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connected esignated Agent: Identification of the position of t	Affiliated Committee by by name, address (phone number – CITY CITY Ories: List all banks or other depositorical intains funds.	optional)	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	C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
PETE RICKETTS VI	CTORY FUND		
Mailing Address	1327 H STREET		
	STE 101		
	LINCOLN	NE	68508
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Spo
	d Organization Affiliated Committee X J		ative Leadership PAC Spo
			Leadership PAC Spo
Designated Agent: Identif			Leadersnip PAC Spo
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1		FEC ID number	C
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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
MAJORITY MAKERS	S FUND		
Mailing Address	2024 3RD AVE N		
Ü	STE 211		
	BIRMINGHAM	AL	35203
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
		rundraising Representa	Leadership FAC 3
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	С
Name of Any Connected	l Organization, Affiliated Committee, Joint Fun	ndraising Representative	e, or Leadership PAC Spons
JUSTICE VICTORY	COMMITTEE		
Mailing Address	3501 MACCORKLE AVE SE		1
	NUM 131		
	CHARLESTON	WV	25304
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte Connecte Connecte Connecte	fy by name, address (phone number – optional)		
Designated Agent: Identi	fy by name, address (phone number – optional)		
Designated Agent: Identi	fy by name, address (phone number – optional)		
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Designated Agent: Identi Full Name Mailing Address	CITY A	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	CITY A	STATE Telephone Number	ZIP CODE A
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Pesignated Agent: Identification Full Name	CITY ▲ CITY ▲ Dries: List all banks or other depositories in which aintains funds. MARSHALL BANK 1625 K STREET NW	Telephone Number	

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

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2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
JONI'S ROAST AND	O RIDE		
	DO DOV 20144		
Mailing Address	PO BOX 93441		
	DES MOINES	LIA L	50393
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Joi	nt Fundraising Representa	ative Leadership PAC Spo
Connect		nt Fundraising Representa	ative Leadership PAC Spo
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Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Representation	Leadership PAC Spo
Connect Designated Agent: Ident Full Name	fy by name, address (phone number – optional)		

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

1.						
1.				FEC II	number	С
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3.				FEC II	number	С
4.				FEC II	number	С
	-		ted Committee, Joint	Fundraising Rep	oresentative	e, or Leadership PAC Spons
SULLIVA	AN VICTORY 2	2020				
Mailing	g Address	901 N WASHINGT	ON ST, SUITE 700			
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,					
		ALEXANDRIA	1 1 1 1 1 1		VA I	22314
Relatio	onship:		CITY A		STATE A	ZIP CODE ▲
				Joint Fundraising		
Designated	Agent: Identify	by name, address (phone number – option	nal)		
Full Nam	ne	oy name, address (phone number – option	nal)		
	ne	by name, address (phone number – option	nal)		
Full Nam	ne	by name, address (phone number – option	nal)		
Full Nam	ne	by name, address (
Full Nam	ne		phone number – option		STATE A	ZIP CODE A
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TITLE OR POSITION ▼ FEC ID number C FEC ID number I	(h). Joint Fundraisi	ng Participant:		
TITLE OR POSITION ▼ FEC ID number FEC ID number C STATE ZIP CODE TITLE OR POSITION ▼	1.		FEC ID number	C
ARLINGTON Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	2.		FEC ID number	С
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spon THUNE VICTORY COMMITTEE Mailing Address PO BOX 9891 ARLINGTON VA 22219 ARLINGTON Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spon Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION CITY A STATE A ZIP CODE A TITLE OR POSITION ZIP CODE A	3.		FEC ID number	С
THUNE VICTORY COMMITTEE Mailing Address PO BOX 9891 ARLINGTON VA 22219 ARLINGTON Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spanization Leadership PAC Spanization Posignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	4.		FEC ID number	С
THUNE VICTORY COMMITTEE Mailing Address PO BOX 9891 ARLINGTON VA 22219 ARLINGTON Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spanization Leadership PAC Spanization Posignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲				
Mailing Address PO BOX 9891 ARLINGTON VA 222219 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spanization Leadership PAC Spanization Posignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲			ındraising Representativ	ve, or Leadership PAC Spons
ARLINGTON Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spatial Name Mailing Address Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	THUNE VICTORY C	COMMITTEE		
ARLINGTON Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spatial Name Mailing Address Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲				
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Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spanization Leadership PAC Spanization Resignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼				
Connected Organization Affiliated Committee		ARLINGTON	, , , , VA	22219
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲	Relationship:	CITY A	STATE A	ZIP CODE ▲
Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲			Joint Fundraising Represen	tative Leadership PAC Sp
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	Connecte esignated Agent: Identi	ed Organization Affiliated Committee X		tative Leadership PAC Sp
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	Connecte resignated Agent: Identi Full Name Mailing Address	Affiliated Committee X	STATE A	
	Connecte resignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Line Line Line Line anks or Other Deposit	Affiliated Committee X fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in whether the state of the state	STATE A Telephone Number	ZIP CODE A
	Connecte resignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the connected agents.	Affiliated Committee X fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in whether the state of the state	STATE A Telephone Number	ZIP CODE A
Name of Bank, Depository, etc.	Connected Resignated Agent: Identification of Bank, Connected Resignated Agent: Identification of Connected Resignated Resignated Resignated Resignation of Connected Resignated Resignat	Affiliated Committee X fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in whether the state of the state	STATE A Telephone Number	ZIP CODE A
Name of Bank,	Connected Resignated Agent: Identification of Position	Affiliated Committee X fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in whether the state of the state	STATE A Telephone Number	ZIP CODE A
Name of Bank, Depository, etc.	Connected Resignated Agent: Identification of Position	Affiliated Committee X fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in whether the state of the state	STATE A Telephone Number	ZIP CODE A
Name of Bank, Depository, etc.	Connected Resignated Agent: Identification of Position	Affiliated Committee X fy by name, address (phone number – optional CITY CITY Ories: List all banks or other depositories in whether the state of the state	STATE A Telephone Number	ZIP CODE A

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

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		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
GRAHAM MAJORIT		 	· · · · · · · · · · · · · · · · · · ·
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA VA	22314
			ZIP CODE ▲
	CITY A ed Organization Affiliated Committee X Jo fy by name, address (phone number – optional)	STATE ▲ int Fundraising Representa	
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Connected Agent: Identi	ed Organization Affiliated Committee X Jo		
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Jo	int Fundraising Representation	Leadership PAC Sp
Connected Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo		

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

	g Participant:				
1			FEC II	number	С
2.			FEC II	number	C
3.			FEC II	number	C
4.			FEC II) number	C
Name of Any Connected HAWKEYE FUND	Organization, Affiliated	Committee, Joint	Fundraising Re _l	oresentativ	e, or Leadership PAC Spons
I J J J J J J J J J J J J J J J J J J J					
Mailing Address	P.O. BOX 183				
	HUDSON		I	WI	54016
Relationship:		CITY A		STATE A	ZIP CODE ▲
Full Name					
Mailing Address					
	1				
TITLE OR POSITION	▼	CITY A		STATE A	ZIP CODE A
1	▼	1	Telephone N		ZIP CODE A
Banks or Other Depositor	ries: List all banks or of		Telephone N	umber	ZIP CODE ZIP CODE s funds, holds accounts, rents
Banks or Other Depositor cafety deposit boxes or ma	ries: List all banks or of	her depositories in	Telephone N	umber	
Banks or Other Depositor cafety deposit boxes or ma	ries: List all banks or of	her depositories in	Telephone N	umber	es funds, holds accounts, rents
Banks or Other Depositors afety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or of	her depositories in	Telephone N	umber	es funds, holds accounts, rents

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

(h). Joint Fundraisir	ig Faiticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 50430		
	NASHVILLE	TN	37205
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
		oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif	d Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif	d Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif	d Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee X Joy by name, address (phone number – optional)		
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Journal of Journal of States (phone number – optional) CITY CITY Tries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	Affiliated Committee X Journal of Journal of States (phone number – optional) CITY CITY Tries: 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

1.				
		FEC II	number	С
2		FEC II	number	С
3.		FEC II	number	С
4.		FEC II	number	C
CAPITO VICTORY	Organization, Affiliated Committee, Join	nt Fundraising Re	oresentative	e, or Leadership PAC Spons
	OFOO COLUTI I WAYEFIELD OTDEET			
Mailing Address	3538 SOUTH WAKEFIELD STREET			
	ARLINGTON		L VA	22206
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Full Name				
Mailing Address				
Mailing Address				
Mailing Address				
Mailing Address TITLE OR POSITION	CITY A		STATE A	ZIP CODE A
TITLE OR POSITION	CITY A	Telephone N		ZIP CODE A
TITLE OR POSITION	ries: List all banks or other depositories i	Telephone N	umber	
TITLE OR POSITION	ries: List all banks or other depositories i intains funds.	Telephone N	umber	
TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories i intains funds.	Telephone N	umber	s funds, holds accounts, rents
TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching the safety deposit boxes or matching the safety deposit boxes or matching the safety depository, etc.	ries: List all banks or other depositories i intains funds.	Telephone N	umber	s funds, holds accounts, rents

Page	of	82	
rage	Oī		

h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
		-	
ame of Any Connected	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
ONE TEAM SENAT	E MAJORITY		
	404 OFFICE DADK DDIVE		
Mailing Address	421 OFFICE PARK DRIVE		
	MOUNTAIN BROOK	AL	35223
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X	oint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional		
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional CITY ▲ Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE 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 what intains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional CITY CITY ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent
esignated Agent: 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 Ories: List all banks or other depositories in what intains funds.	STATE Telephone Number ich the committee deposi	ZIP CODE A ts funds, holds accounts, rent
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 Ories: List all banks or other depositories in what intains funds.	STATE Telephone Number ich the committee deposi	ZIP CODE A ts funds, holds accounts, rent

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

1.						
2				FEC	ID number	C
2				FEC	ID number	С
3. 🔟				FEC	ID number	С
4.				FEC	ID number	С
	Any Connected Curtis Dinner C	_	filiated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Spons
Maili	ng Address	PO Box 30844				
		Bethesda			MD	20824
Rala	tionship:		CITY ▲		STATE ▲	ZIP CODE ▲
Designate	d Agent: Identify	Organization by name, address	Affiliated Committee	Joint Fundraisi	ng Represent	Leadership PAC Spo
Designate Full Na	d Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Na	d Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Na	d Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Na Mailing	d Agent: Identify ame	by name, addres	ss (phone number – optio		ng Represent	
Designate Full Na Mailing	d Agent: Identify	by name, addres			STATE A	Leadership PAC Spo

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	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spon
ASHLEY HINSON V	ICTORY COMMITTEE		
	DO DOY 044		
Mailing Address	PO BOX 811		
	MARION	IA L	52302
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
•			
	ed Organization Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
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: 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 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 market	fy by name, address (phone number – optional) 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 mane of Bank,	fy by name, address (phone number – optional) 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 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	fy by name, address (phone number – optional) 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 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

1.			FEC ID nu	mber	C
2.			FEC ID nu	mber	C
3.			FEC ID nu	mber	С
4.			 FEC ID nu	mber	С
lame of Any Con	nected Organization	, Affiliated Committee, Joint	Fundraising Repres	entative,	, or Leadership PAC Spor
JOSH HAWLE	Y VICTORY COMI	MITTEE 			
Mailing Addre	P.O. BOX	31476			
Mailing Addres					
	SAINT LO	UIS		MO ı	, 63131
				ATE A	
Polationship				AIL 🔺	ZIP CODE ▲
	onnected Organization	CITY A Affiliated Committee	Joint Fundraising Re		tive Leadership PAC S
Co		Affiliated Committee	Joint Fundraising Re		tive Leadership PAC S
esignated Agent:	Identify by name, ad	Affiliated Committee	Joint Fundraising Re		tive Leadership PAC S
esignated Agent:	Identify by name, ad	Affiliated Committee	Joint Fundraising Re		tive Leadership PAC S
esignated Agent:	Identify by name, ad	Affiliated Committee	Joint Fundraising Re		tive Leadership PAC S
esignated Agent:	Identify by name, ad	Affiliated Committee	Joint Fundraising Re		Leadership PAC S
Pesignated Agent: Full Name Mailing Address	Identify by name, ad	Affiliated Committee	Joint Fundraising Re	presentat	

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	of	of ⁸²

Mailing Address ST AL Relationship: Connected Orga	MMITTEE 11 N WASHINGTON ST TE 700 LEXANDRIA CITY	F	EC ID number EC ID number EC ID number EC ID number Representativ	
3. 4. AL Relationship:	MMITTEE 11 N WASHINGTON ST TE 700 LEXANDRIA CITY	F	FEC ID number FEC ID number Ing Representative	C C Te, or Leadership PAC Spons
A. COTTON MAJORITY COMMailing Address Mailing Address ST AL Relationship: Connected Organ	MMITTEE 11 N WASHINGTON ST TE 700 LEXANDRIA CITY	F	Representativ	re, or Leadership PAC Spons
Name of Any Connected Organ COTTON MAJORITY COM Mailing Address ST AL Relationship: Connected Organ	MMITTEE 11 N WASHINGTON ST TE 700 LEXANDRIA CITY		ng Representativ	re, or Leadership PAC Spons
COTTON MAJORITY COM Mailing Address ST AL Relationship: Connected Organ	MMITTEE 11 N WASHINGTON ST TE 700 LEXANDRIA CITY	Joint Fundraisi		
Mailing Address Mailing Address ST AL Relationship: Connected Organ	MMITTEE 11 N WASHINGTON ST TE 700 LEXANDRIA CITY	Joint Fundraisi		
Mailing Address ST AL Relationship: Connected Orga	D1 N WASHINGTON ST TE 700 LEXANDRIA CITY			
Mailing Address ST AL Relationship: Connected Orga	TE 700 LEXANDRIA			
Mailing Address ST AL Relationship: Connected Orga	TE 700 LEXANDRIA			
Relationship: Connected Orga	_EXANDRIA		VA	
Relationship: Connected Orga	CITY ▲		VA	
Connected Orga				22314
	nization Affiliated Committee		STATE A	ZIP CODE ▲
	ame, address (phone number –	optional)		
Full Name				
Mailing Address				
TITLE OR POSITION ▼	CITY A		STATE ▲	ZIP CODE ▲
		Teleph	none Number	

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

(h). Joint Fundraisi	ng raiticipant.		
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
TILLIS-NRSC COMI	MITTEE 		
	P.O. BOX 97275		
Mailing Address			
	RALEIGH	NC NC	27624
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee X 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	Ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the position	fy by name, address (phone number – optional) 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,	fy by name, address (phone number – optional) 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,	fy by name, address (phone number – optional) 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 management of Bank, epository, etc.	fy by name, address (phone number – optional) 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 Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	re, or Leadership PAC Spons
TIM SCOTT VICTOR	RY FUND		
Mailing Address	1405 ASHLEY RIVER RD		
	CHARLESTON	SC	29407
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	tative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X J		tative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X J		tative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X J		Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X J		
Connecte Designated Agent: Identif	d Organization Affiliated Committee X J		Leadership PAC Spo
Connected Designated Agent: Identify Full Name Mailing Address	d Organization Affiliated Committee X J		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	d Organization Affiliated Committee X July by name, address (phone number – optional CITY A CITY A pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite to the safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	d Organization Affiliated Committee X July by name, address (phone number – optional CITY A CITY A pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents

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

(h). Joint Fundraisii	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	С
4		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
ORAI O VIOTORTI C			
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Represent	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joint Join	nt Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee X Joint Join		
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	d Organization Affiliated Committee Solution Joint Joi	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposites afety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	d Organization Affiliated Committee Solution Joint Joi	STATE A Telephone Number	ZIP CODE A

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

			FEC	ID number	С
			FEC	ID number	С
			FEC	ID number	С
			FEC	ID number	С
any Connected (Organization, Af	ffiliated Committee, Join	t Fundraising R	epresentativ	e, or Leadership PAC Spons
NRCC VICTOR	RY COMMITTE	E 			
ng Address	228 S WASHIN	NGTON STREET #115			
	ALEXANDRIA	<u> </u>		_ ∨A 	22314
ionship:		CITY A		STATE ▲	ZIP CODE ▲
Agent: Identity	by name, addre	ss (phone number – opti	onal)		
me	by name, addre	ss (phone number – option	onal)		
	by name, addre	ss (phone number – optic	onal)		
me	by name, addre	ss (phone number – option	onal)		
me		ss (phone number – option of the state of th	onal)	STATE A	ZIP CODE A
me			Telephone		ZIP CODE A
	NRCC VICTOR Ing Address Connected	ng Address 228 S WASHII ALEXANDRIA ionship: Connected Organization	NRCC VICTORY COMMITTEE 228 S WASHINGTON STREET #115 ALEXANDRIA ionship: Connected Organization Affiliated Committee	Any Connected Organization, Affiliated Committee, Joint Fundraising Rendered NRCC VICTORY COMMITTEE ang Address 228 S WASHINGTON STREET #115 ALEXANDRIA ionship: CITY Connected Organization Affiliated Committee X Joint Fundraisi	alexandria 228 S Washington Street #115 ALEXANDRIA Connected Organization Affiliated Committee X Joint Fundraising Represent

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

5(g) or (h). Joint Fund	Iraising Participant:				
1.		F	EC ID number	С	
2.		F	EC ID number	С	
3.		F	EC ID number	С	
4.		F	EC ID number	С	
	ected Organization, Affiliated Com	mittee, Joint Fundraisin	g Representative	e, or Leadership PAC Spor	nsor
WICKER VICTO	DRY COMMITTEE				
Mailing Addres	s 228 S WASHINGTON STRE	ET SUITE 115		1 1 1 1 1 1 1 1	
	ALEXANDRIA		VA	22314	1 1
Relationship:	CIT	Y A	STATE ▲	ZIP CODE ▲	
	dentify by name, address (phone nu	ımber – optional)			
Full Name					
Mailing Address					
Ü					
J					
Ü					
TITLE OR POS	ITION ▼ CITY		STATE A	ZIP CODE A	
	ITION ▼		STATE ▲ one Number	ZIP CODE A	
TITLE OR POS	oositories: List all banks or other de	Teleph	one Number		nts
TITLE OR POS Banks or Other De safety deposit boxes Name of Bank,	positories: List all banks or other de or maintains funds.	Teleph	one Number		nts
Banks or Other De safety deposit boxes Name of Bank, Depository, etc.	positories: List all banks or other de or maintains funds.	Teleph	one Number		nts

Page	of 82	
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5(g) or (h).	Joint Fundraising	Participant:			
1.				FEC ID number	C
2.				FEC ID number	C
3. [FEC ID number	C
4. [FEC ID number	C
	of Any Connected C		ittee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
N	Mailing Address	PO BOX 183			
		HUDSON		WI	54016
F	Relationship:	CITY	A	STATE ▲	ZIP CODE ▲
	nated Agent: Identify	by name, address (phone num	ber – optional)		
		1			
Ma	illing Address				
		_ CITY ^		STATE ▲	ZIP CODE A
Tľ	TLE OR POSITION '	V 0111 X	1		ZII OODL 🛋
			Telep	phone Number	
safety o	or Other Depositori deposit boxes or main of Bank, tory, etc.	es: List all banks or other depontains funds.	ositories in which the	committee deposit	s funds, holds accounts, rents
safety of Name of Deposit	deposit boxes or main of Bank,	es: List all banks or other depentains funds.	ositories in which the	committee deposit	s funds, holds accounts, rents
safety of Name of Deposit	deposit boxes or main of Bank, tory, etc.	es: List all banks or other depentains funds.	ositories in which the	committee deposit	s funds, holds accounts, rents
safety of Name of Deposit	deposit boxes or main of Bank, tory, etc.	es: List all banks or other depontains funds.	ositories in which the	committee deposit	s funds, holds accounts, rents

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
MONDAY MEETING	; PAC		
	<u> </u>		
Mailing Address	228 S. WASHINGTON STREET		
Mailing Address	SUITE 115		
	ALEXANDRIA		22314
5		VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	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	
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 To	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 mail to the content of the conte	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 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 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

1.			
		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
GRAHAM MAJORIT		 	· · · · · · · · · · · · · · · · · · ·
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA VA	22314
			ZIP CODE ▲
	CITY A ed Organization Affiliated Committee X Jo fy by name, address (phone number – optional)	STATE ▲ int Fundraising Representa	
Connected Agent: Identi	ed Organization Affiliated Committee X Jo		
Connected Connected Pesignated Agent: Identification	ed Organization Affiliated Committee X Jo		
Connected Agent: Identi	ed Organization Affiliated Committee X Jo		
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Jo	int Fundraising Representation	Leadership PAC Sp
Connected Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo		

Page	of 82	

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
ame of Any Connected TEAM RAND	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 190		
	NEWPORT	KY KY	41072
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee X		Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identing Full Name Mailing Address	by by name, address (phone number – optional		Leadership PAC Sp
esignated Agent: Identi	by by name, address (phone number – optional		
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	cy by name, address (phone number – optional state of the control	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identii Full Name	cy by name, address (phone number – optional state of the control	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	cy by name, address (phone number – optional state of the control	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposited afety deposit boxes or management and manageme	cy by name, address (phone number – optional state of the control	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.	cy by name, address (phone number – optional state of the control	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.	cy by name, address (phone number – optional state of the control	STATE A Telephone Number	ZIP CODE A

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	of	of ⁸²

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FEC ID number FEC ID number C Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spore M JONI DES MOINES DES MOINES DES MOINES CITY A STATE A ZIP CODE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC S
FEC ID number G Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spor M JONI ailing Address PO BOX 93441 DES MOINES Leadership PAC Some State A ZIP CODE A Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC S
Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sport M JONI DES MOINES PO BOX 93441 DES MOINES PO BOX 93441 DES MOINES LA 50393 Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sport M JONI Leadership PAC Sport M JONI Affiliated Committee X Joint Fundraising Representative
Affiliated Committee PO BOX 93441 DES MOINES LA 50393 ZIP CODE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC S
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Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC S
Name
ing Address
LE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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

228 S. WA STE. 115 ALEXAND ected Organization	JND SHINGTON ST.	oint Fundraisir	FEC ID number FEC ID number FEC ID number FEC ID number THE THE TEC ID Number THE THE THE TEC ID Number THE THE THE TEC ID NUMBER THE	C C C C C C C C Z Z Z Z Z Z Z Z Z Z Z Z
228 S. WA STE. 115 ALEXAND ected Organization	SHINGTON ST. ORIA CITY Affiliated Committee	oint Fundraisir	FEC ID number FEC ID number IN THE STATE A	re, or Leadership PAC Spon
228 S. WA STE. 115 ALEXAND ected Organization	SHINGTON ST. ORIA CITY Affiliated Committee	oint Fundraisir	Representative VA	re, or Leadership PAC Spon
228 S. WA STE. 115 ALEXAND ected Organization	SHINGTON ST. ORIA CITY Affiliated Committee	oint Fundraisir	ng Representativ	ze, or Leadership PAC Spon
228 S. WA STE. 115 ALEXAND ected Organization	SHINGTON ST. ORIA CITY Affiliated Committee	X Joint Fund	VA STATE A	22314 ZIP CODE A
228 S. WA STE. 115 ALEXAND ected Organization	SHINGTON ST. ORIA CITY Affiliated Committee	X Joint Fund	VA STATE A	22314 ZIP CODE A
STE. 115 ALEXAND	CITY Affiliated Committee	_	STATE A	ZIP CODE ▲
STE. 115 ALEXAND	CITY Affiliated Committee	_	STATE A	ZIP CODE ▲
ALEXAND ALEXAND	CITY ▲ Affiliated Committee	_	STATE A	ZIP CODE ▲
ected Organization	CITY ▲ Affiliated Committee	_	STATE A	ZIP CODE ▲
	Affiliated Committee	_		
		_	draising Represent	tative Leadership PAC S
	CITY A		STATE A	ZIP CODE ▲
TION ▼	0111 =			211 0002 2
		Teleph	one Number	
0	ositories: List all t	nositories: List all banks or other depositorie or maintains funds.	Telephositories: List all banks or other depositories in which the or maintains funds.	Telephone Number Dositories: List all banks or other depositories in which the committee depositor maintains funds.

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

1.			
I		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fo	undraising Representativ	e, or Leadership PAC Spons
RUBIO VICTORY CO	OMMITTEE		
Mailing Address	228 S WASHINGTON STREET SUITE 115		
	ALEXANDRIA	, , VA ,	, 22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	y by name, address (phone number – optiona	Joint Fundraising Represent	
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identing Full Name Mailing Address	y by name, address (phone number – optiona		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optiona		ZIP CODE A

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

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
-	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
BLACKBURN VICTO	JRY FUND 		
Mailing Address	PO BOX 3241		
	1		
	BRENTWOOD	TN	37024
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name address (phone number – ontional)		
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		ZIP CODE A
Full Name _ _ Mailing Address	CITY A	STATE A Telephone Number	
Full Name _ _ Mailing Address	CITY A pries: List all banks or other depositories in wh	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or make the same of Bank,	CITY ▲ CITY ▲ pries: List all banks or other depositories in what intains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	CITY A CITY A pries: List all banks or other depositories in what intains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	CITY A city A pries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents

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

1.				
			FEC ID number	С
2.			FEC ID number	С
3.		1	FEC ID number	С
4.			FEC ID number	С
lame of Any Connected	Organization, Affiliated Committ	ee, Joint Fundrais	ing Representativ	e, or Leadership PAC Spons
CORNYN VICTORY	COMMITTEE			
1				
Mailing Address	PO BOX 13026			
	AUSTIN		, NC	78711
Relationship:	CITY A		STATE A	ZIP CODE ▲
	y by name, address (phone numbe	er – optional)		
Full Name	y by name, address (phone number	er — optional)		
	y by name, address (phone number	er — optional)		
Full Name	y by name, address (phone number	er — optional)		
Full Name	y by name, address (phone number	er — optional)		
Full Name	CITY A	er — optional)	STATE A	ZIP CODE A
Full Name	CITY A		STATE A	

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
BANKS VICTORY F	:UND 		
Mailing Address	PO BOX 30844		
	1		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	52		
		oint Fundraising Represent	ative Leadership PAC Spo
Connecto			ative Leadership PAC Spo
Connecto	ed Organization Affiliated Committee X J		ative Leadership PAC Spo
Connecte Cesignated Agent: Identi	ed Organization Affiliated Committee X J		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X J		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X J		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X J		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	ed Organization Affiliated Committee X J		
Connecte Designated Agent: Identi Full Name Mailing Address	ed Organization Affiliated Committee X J	STATE A	
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit	ed Organization Affiliated Committee X J ify 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 safety deposit boxes or mailing agents.	ed Organization Affiliated Committee X J ify 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	ed Organization Affiliated Committee X J ify 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 tafety deposit boxes or make the same of Bank,	ed Organization Affiliated Committee X J ify 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 Sanks or Other Depositional bank, Depository, etc.	ed Organization Affiliated Committee X J ify 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 Sanks or Other Depositional bank, Depository, etc.	ed Organization Affiliated Committee X J ify by name, address (phone number – optional) CITY CITY ories: 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

	ng Participant:		
1.		FEC ID numbe	r C
2.		FEC ID numbe	er C
3.		FEC ID numbe	or C
4		FEC ID numbe	or C
Name of Any Connected MULLIN VICTORY I	I Organization, Affiliated Committee, Joint	Fundraising Representa	tive, or Leadership PAC Spons
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE	▲ ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number - option	al)	
Designated Agent: Identi	fy by name, address (phone number – option	al)	
	fy by name, address (phone number – option	al)	
Full Name	fy by name, address (phone number – option	al)	
Full Name	fy by name, address (phone number – option	al)	
Full Name	CITY	al) STATE	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A	STATE 4	ZIP CODE A
Full Name _ _ Mailing Address	CITY A	STATE 4	
Full Name Mailing Address TITLE OR POSITION	CITY ▲ Ories: List all banks or other depositories in viaintains funds.	STATE 4	psits funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or make the safety deposit boxes or make	CITY A cries: List all banks or other depositories in variations funds.	STATE A Telephone Number	psits funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A city A pories: List all banks or other depositories in viaintains funds.	STATE A Telephone Number which the committee depo	psits funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A city A pories: List all banks or other depositories in viaintains funds.	STATE A Telephone Number	psits funds, holds accounts, rents

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

(h). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
SHEEHY VICTORY	COMMITTEE		
Mailing Address	228 S WASHINGTON ST		
	STE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X J	oint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name			ative Leadership PAC Spo
Connecte Designated Agent: Identi			ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name			ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional)	STATE A	
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional)		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or make the safety deposit boxes o	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Depositional Pank, Depository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or make the safety deposit boxes o	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Depositional Pank, Depository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A

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(h). Joint Fundrais i	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fu	ındraising Representativ	ve, or Leadership PAC Spons
HYDE-SMITH VICT	ORY COMMITTEE		
Mailing Address	PO BOX 2930		
	JACKSON	MS	39207
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		Joint Fundraising Represen	tative Leadership PAC Spo
Connect Designated Agent: Ident			tative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X		tative Leadership PAC Spo
Connect Designated Agent: Ident	ed Organization Affiliated Committee X		tative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X		tative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X.		
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X		Leadership PAC Spo
Connect Designated Agent: Ident Full Name Mailing Address	ed Organization Affiliated Committee X		
Connect Designated Agent: Ident Full Name Mailing Address	ed Organization Affiliated Committee X	STATE A	
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit	ed Organization Affiliated Committee X ify by name, address (phone number – optional CITY A cories: List all banks or other depositories in whether the second content is a second content of the s	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 necessity.	ed Organization Affiliated Committee X ify by name, address (phone number – optional CITY A cories: List all banks or other depositories in whether the second content is a second content of the s	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 X ify by name, address (phone number – optional CITY A cories: List all banks or other depositories in whether the second content is a second content of the s	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or necessary to the position of Bank,	ed Organization Affiliated Committee X ify by name, address (phone number – optional CITY A cories: List all banks or other depositories in whether the second content is a second content of the s	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 boxed and a second control of the boxes or not be boxed and a second control of the boxes or not be boxed and a second control of the boxed and	ed Organization Affiliated Committee X ify by name, address (phone number – optional CITY A cories: List all banks or other depositories in whether the second content is a second content of the s	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 boxed and a second control of the boxes or not be boxed and a second control of the boxes or not be boxed and a second control of the boxed and	ed Organization Affiliated Committee X ify by name, address (phone number – optional CITY A cories: List all banks or other depositories in whether the second content is a second content of the s	STATE A Telephone Number	ZIP CODE A

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

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connector	I Organization, Affiliated Committee, Joint Fund	raising Paprasantative	o or Loadorship PAC Spon
SUSAN COLLINS F		Talsing Representative	., or readership the opon
Mailing Address	PO BOX 72100		
Mailing Address			
	NEWPORT	, KY	41072
Relationship:	CITY ▲		ZIP CODE A
nelationship.	OHY A	STATE ▲	ZIP CODE A
	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		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	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: 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 To	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 pries: 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 To pries: 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 To pries: 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 To pries: 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 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

HE US SE	NATE 2026	LEDGE AVE STE	E 101 FY ▲ Committee		FEC II	GA STATE A	30	605	PAC Spons
dress Connected nt: Identify	NATE 2026	LEDGE AVE STE	E 101 FY ▲ Committee		FEC III	onumber oresentativ GA STATE	e, or Le	605 ZIP C	
dress Connected nt: Identify	NATE 2026	LEDGE AVE STE	E 101 FY ▲ Committee		FEC II	oresentativ	e, or Le	605 ZIP C	
dress Connected nt: Identify	NATE 2026	LEDGE AVE STE	E 101 FY ▲ Committee		ising Rep	GA STATE A	e, or Le	605 ZIP C	
dress Connected nt: Identify	NATE 2026	LEDGE AVE STE	E 101 FY ▲ Committee			GA STATE A	30	605 ZIP C	
p: Connected nt: Identify	824 S MILL ATHENS Organization	LEDGE AVE STE	ΓΥ ▲ Committee	X Joint F	-undraising	STATE A		ZIP C	CODE A
p: Connected nt: Identify	ATHENS	CIT Affiliated (ΓΥ ▲ Committee	X Joint F	-undraising	STATE A		ZIP C	CODE A
p: Connected nt: Identify	ATHENS	CIT Affiliated (ΓΥ ▲ Committee	X Joint F	-undraisin(STATE A		ZIP C	CODE A
Connected nt: Identify	Organization	Affiliated (Committee	X Joint F	-undraising	STATE A		ZIP C	ODE A
Connected nt: Identify	Organization	Affiliated (Committee	X Joint I	- - - undraising	STATE A		ZIP C	ODE A
Connected nt: Identify		Affiliated (Committee	× Joint I	- undraisinç			-	ODE A
nt: Identify		_		X Joint I	- undraisino	n Renresent		-	
ess	1								
]- <u> </u>
POSITION	▼	CITY	^			SIAIE		ZIP CC	DDE A
				Tele	ephone N	umber _		-	
	POSITION	POSITION ▼ Depositories: List all b	POSITION V	CITY ▲ CITY ▲ Depositories: List all banks or other depositories are or maintains funds.	CITY ▲ CITY ▲ Depositories: List all banks or other depositories in which the case or maintains funds.	CITY ▲ CITY ▲ Telephone N Depositories: List all banks or other depositories in which the commit xes or maintains funds.	CITY ▲ STATE ▲ COSITION ▼ CITY ▲ Telephone Number Depositories: List all banks or other depositories in which the committee depositives or maintains funds.	CITY ▲ STATE ▲ COSITION ▼ CITY ▲ Telephone Number Depositories: List all banks or other depositories in which the committee deposits funds, xes or maintains funds.	CITY ▲ STATE ▲ ZIP CO Telephone Number — — — — — — — — — — — — — — — — — — —

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

	g Participant:	FEC ID number	C
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundri GUES VICTORY COMMITTEE	aising Representative	e, or Leadership PAC Spon
Mailing Address	228 S WASHINGTON STREET SUITE 115		
Maining / Idanoso			
	ALEXANDRIA	ı VA	22314
Data Consider			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee X Joint by name, address (phone number – optional)	Fundraising Represent	Leadership PAC S
		Fundraising Represent	Leadership PAC S
esignated Agent: Identify		Fundraising Represent	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Represent	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Represent	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	Fundraising Represent	
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	by name, address (phone number – optional) CITY CITY Te ies: 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 main	by name, address (phone number – optional) CITY CITY Te ies: 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 mail	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY CITY Te ies: 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 main ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Te 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

h). Joint Fundraisi	ig Faiticipant.		The second secon
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
WINNING FOR AME	RICA FUND		
	1 101 W ARGONNE DR		
Mailing Address	#24		
	SAINT LOUIS	MO MO	63122
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee X Join 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		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	by by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif	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
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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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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

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

h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Overanization Affiliated Committee Joint Fun	dvoicing Depresentativ	re or Leadership DAC Spen
TEAM MCCORMICK	Organization, Affiliated Committee, Joint Fun	uraising nepresentativ	e, or Leadership FAC Spon
Mailing Address	PO BOX 23537		
_			
	PITTSBURGH	ı PAı	15222
Relationship:	CITY A	STATE A	
i icialionalip.	OH T	SIAIL	ZIF CODE A
Connecte	od Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC S
Connecte		int Fundraising Represent	tative Leadership PAC S
Connecte		int Fundraising Represent	tative Leadership PAC S
Connecte esignated Agent: Identif		int Fundraising Represent	tative Leadership PAC S
Connecte esignated Agent: Identif		int Fundraising Represent	tative Leadership PAC S
Connecte esignated Agent: Identif	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification of the connected agent and a series of the connected and a series of the connected agent and a series of the connected agent and a series of the connected agent agent and a series of the connected agent agent agent agent and a series of the connected agent	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
connected esignated Agent: Identification of the position of t	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connected esignated Agent: Identification of the position of t	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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

	ng Participant:			
1.		FEC ID nu	mber C	
2.		FEC ID nu	mber C	
3.		FEC ID nu	mber C	
4.		FEC ID nu	mber C	
·				
Name of Any Connected	d Organization, Affiliated Committee, Joint	Fundraising Represe	entative, or Le	adership PAC Spons
COLLINS VICTORY	COMMITTEE			
	901 N WASHINGTON ST, STE 700			
Mailing Address				
	ALEXANDRIA		VA	314
Relationship:	CITY ▲	ST	ATE 🛦	ZIP CODE ▲
Full Name				
Full Name				
	CITY A	STA	TE A	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A	STAT		ZIP CODE A
Mailing Address TITLE OR POSITION	√			ZIP CODE A
Mailing Address TITLE OR POSITION	ories: List all banks or other depositories in	Telephone Numb	er LIII.	
Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or necessity.	ories: List all banks or other depositories in	Telephone Numb	er LIII.	
Mailing Address TITLE OR POSITION	ories: List all banks or other depositories in naintains funds.	Telephone Numb	er deposits funds,	holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be safety deposit boxes.	ories: List all banks or other depositories in naintains funds.	Telephone Numb	er deposits funds,	holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be boxes or not be boxes. Depository, etc.	ories: List all banks or other depositories in naintains funds.	Telephone Numb	er deposits funds,	holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be boxes or not be boxes. Depository, etc.	ories: List all banks or other depositories in naintains funds.	Telephone Numb	er deposits funds,	holds accounts, rents

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	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
HOGAN VICTORY F	FUND		
AA-W- AAIA-	2077 SOMERVILLE ROAD		
Mailing Address	SUITE 206		
			04404
	ANNAPOLIS	MD MD	21401
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative 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)	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 TITLE OR POSITION	fy by name, address (phone number – optional) CITY To	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: 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 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: 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 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, 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
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 To ories: List all banks or other depositories in which	STATE A	ZIP CODE A

Page	of 82
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h). Joint Fundraisin	g 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 Representativ	ve, or Leadership PAC Spons
PA VICTORY			
Mailing Address	421 OFFICE PARK DRIVE		
	MOUNTAIN BROOK	, , , , , AL ,	35223
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connected	CITY A	Joint Fundraising Represen	
esignated Agent: Identify Full Name	CITY ▲ I Organization Affiliated Committee X	Joint Fundraising Represen	
Connected esignated Agent: Identify	CITY ▲ I Organization Affiliated Committee X	Joint Fundraising Represen	
esignated Agent: Identify Full Name	CITY ▲ I Organization Affiliated Committee X	Joint Fundraising Represen	
esignated Agent: Identify Full Name Mailing Address	CITY A Affiliated Committee by name, address (phone number – optional CITY A	Joint Fundraising Represen	
esignated Agent: Identify Full Name	CITY A Affiliated Committee by name, address (phone number – optional CITY A	Joint Fundraising Represen	Leadership PAC Sp

Page	of 82
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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
ame of Any Connecte	d Organization, Affiliated Committee, Joint Fo	undraising Representativ	e, or Leadership PAC Spon
CAO VICTORY FUI	ND 2024		
Mailing Address	PO BOX 30844		
	BETHESDA	ı ı MD ı	20824
Relationship:	CITY ▲	STATE A	ZIP CODE A
	Affiliated Committee X ify by name, address (phone number – optiona	Joint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident			Leadership PAC Sp
esignated Agent: Ident			Ative Leadership PAC Sp
esignated Agent: Ident			Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optiona	i)	
esignated Agent: Ident	ify by name, address (phone number – optiona		Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optiona	i)	
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optiona	STATE A	
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional content of the conte	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION TITLE OR P	ify by name, address (phone number – optional content of the conte	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	cify by name, address (phone number – optional depositories in what in a funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	cify by name, address (phone number – optional depositories in what in a funds.	STATE Telephone Number inich the committee deposit	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	CITY A cories: List all banks or other depositories in what in a sintains funds.	STATE Telephone Number inich the committee deposit	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	CITY A cories: List all banks or other depositories in what in a sintains funds.	STATE Telephone Number inich the committee deposit	ZIP CODE A

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1.					
1			FEC ID	number	C
2.			FEC ID 1	number	C
3.	<u> </u>		FEC ID i	number	C
4.	<u> </u>		FEC ID	number	C
		ated Committee, Joint F	undraising Repre	sentative	e, or Leadership PAC Spons
LONESTAR VICTO	RY FUND				
Mailing Address	PO BOX 13026		<u> </u>		
			1 1 1 1 1 1		
	AUSTIN		1	TX	78711
Relationship:		CITY A		STATE A	ZIP CODE ▲
esignated Agent: Iden Full Name	tify by name, address	(phone number – optiona	al)	1 1 1	
Mailing Address					
	1		1		1
TITLE OR POSITIO	N ▼	CITY A	ST	ATE A	ZIP CODE ▲
		1	Telephone Nun	nber	

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

(h). Joint Fundraisir	•		
1.		FEC ID numb	er C
2.		FEC ID numb	er C
3.		FEC ID numb	er C
4.		FEC ID numb	er C
Name of Any Connected NELLA VICTORY FU	Organization, Affiliated Committee, Joint I	Fundraising Represent	ative, or Leadership PAC Spons
Mailing Address	P.O. BOX 90574		
	ALBUQUERQUE	NM	87199
Relationship:	CITY ▲	STATE	ZIP CODE ▲
	d Organization Affiliated Committee	Joint Fundraising Repres	Sentative Leadership PAC Spo
Designated Agent: Identif			Sentative Leadership PAC Spo
Designated Agent: Identif			Leadership PAC Spo
Designated Agent: Identif			Leadership PAC Spo
Designated Agent: Identif			Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – option		
Pesignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – option	al)	
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – option CITY CITY ories: List all banks or other depositories in v	al) STATE Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Agents or Other Depositor	y by name, address (phone number – option CITY CITY pries: List all banks or other depositories in valintains funds.	al) STATE Telephone Number which the committee dep	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Stafety deposit boxes or make the staf	y by name, address (phone number – option CITY CITY pries: List all banks or other depositories in variations funds.	al) STATE Telephone Number which the committee dep	ZIP CODE A Dosits funds, holds accounts, rents
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Confetty deposit boxes or make the property of the proposition of Bank, Depository, etc.	y by name, address (phone number – option CITY CITY pries: List all banks or other depositories in valintains funds.	al) STATE Telephone Number which the committee dep	ZIP CODE A Dosits funds, holds accounts, rents

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	of	of ⁸²

(h). Joint Fundraisin	g Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
INCSC VICTORY			
Mailing Address	228 S WASHINGTON ST		
	STE 115		1 1 1 1 1 1 1 1 1
	ALEXANDRIA	VA V	22314
			ZIP CODE ▲
		STATE ▲ Dint Fundraising Representa	
Connected			_
Connected Connected Connected Connected Connected	d Organization Affiliated Committee X J		_
Connected Designated Agent: Identify Full Name	d Organization Affiliated Committee X J		_
Connected Designated Agent: Identify Full Name	d Organization Affiliated Committee X J		_
Connected Designated Agent: Identify Full Name	Affiliated Committee X Joby name, address (phone number – optional)		_
Connected Designated Agent: Identify Full Name Mailing Address	Affiliated Committee X Joby name, address (phone number – optional)	pint Fundraising Representation	ative Leadership PAC Sp

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

(h). Joint Fundraisir	ng Participant:			
1.		FEC ID nun	nber C	
2.		FEC ID nun	nber C	
3.		FEC ID nun	nber C	
4		FEC ID nun	nber C	
	Organization, Affiliated Committee, Joi	nt Fundraising Represe	ntative, or Lead	ership PAC Spons
TEAM MORENO				
Mailing Address	P.O. BOX 340797			
-				
	COLUMBUS		OH 4323	4
Deletienshin	CITY A		⊥ TE ▲	ZIP CODE ▲
Relationship:	CITY A	SIA	· - -	
Connecte Designated Agent: Identif	d Organization Affiliated Committee y by name, address (phone number – opt	X Joint Fundraising Rep		Leadership PAC Spo
Connecte	d Organization Affiliated Committee	X Joint Fundraising Rep		Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee	X Joint Fundraising Rep		Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee	X Joint Fundraising Rep		Leadership PAC Spo
Connecte Designated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee y by name, address (phone number – opt	X Joint Fundraising Rep	resentative	Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee y by name, address (phone number – opt	Joint Fundraising Rep	resentative	
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – options) CITY	Joint Fundraising Reprisonal) STATI	resentative	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – opi	Joint Fundraising Reprisonal) STATI	resentative	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	Affiliated Committee y by name, address (phone number – opi	Joint Fundraising Reprisonal) STATI	resentative	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee y by name, address (phone number – opi	Joint Fundraising Reprisonal) STATI	resentative	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposited to the state of Bank, and the state of Bank,	Affiliated Committee y by name, address (phone number – opi	Joint Fundraising Reprisonal) STATI	resentative	
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee y by name, address (phone number – opi	Joint Fundraising Reprisonal) STATI	resentative	ZIP CODE A

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

1					
			FEC I	D number	С
2.			FEC I	D number	C
3.			FEC I	D number	C
4.			 FEC I	D number	С
Name of Any Connected KARI LAKE VICTOR		Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 34341				
	PHOENIX			L AZ ⊥	85067
Relationship:		CITY A		STATE A	ZIP CODE ▲
Full Name					
Mailing Address					
Mailing Address					
Mailing Address					
Mailing Address TITLE OR POSITION	\	CITY A		STATE A	ZIP CODE A
TITLE OR POSITION		1	Telephone N		ZIP CODE A
TITLE OR POSITION	ories: List all banks or oth			Number	ZIP CODE ZIP CODE ts funds, holds accounts, rents
TITLE OR POSITION	ories: List all banks or oth	ner depositories in v	which the comm	Number	
TITLE OR POSITION Banks or Other Depositor Cafety deposit boxes or management of Bank,	ories: List all banks or oth	ner depositories in v	which the comm	Number	ts funds, holds accounts, rents
TITLE OR POSITION Banks or Other Depositor Banks of Bank, Depository, etc.	ories: List all banks or oth	ner depositories in v	which the comm	Number	ts funds, holds accounts, rents

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

Prganization, Affiliated		FEC ID FEC ID	number number number number	C C C c, or Leadership	o PAC Spon
rganization, Affiliated	Committee, Joint Fu	FEC ID	number	C	o PAC Spon
rganization, Affiliated	Committee, Joint Fu	FEC ID	number	С	o PAC Spon
rganization, Affiliated	Committee, Joint Fu				o PAC Spon
		ndraising Rep	resentative	e, or Leadership	p PAC Spon
		ndraising Rep	resentative	e, or Leadership	PAC Spon
FUNDRAISING CO	MMITTEE				
PO BOX 30844					
1 0 20X 00044					
BETHESDA			MD	20824	
	CITY A		STATE A	ZIF	CODE A
by name, address (pho	ne number – optional)		1 1 1		
			1 1 1		
		1	1 . 1	1	
	CITY A	S	TATE A	ZIP (CODE A
,	CITY A	Telephone Nu	TATE A	ZIP (CODE A
	Organization Affilia	BETHESDA CITY Organization	BETHESDA CITY Organization	BETHESDA CITY STATE Organization Affiliated Committee X Joint Fundraising Representation of the property of the propert	BETHESDA CITY STATE ZIF Organization Affiliated Committee Joint Fundraising Representative Leade by name, address (phone number – optional)

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	re, or Leadership PAC Spons
RECLAIM THE MAJ	ORITY		
	421 OFFICE PARK DR		
Mailing Address			
	MOUNTAIN BROOK	AL	35223
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X J	oint Fundraising Represent	tative Leadership PAC Spo
Connecte			tative Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee X J		tative Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee X J		Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee X J		Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	Affiliated Committee X J		Leadership PAC Spo
Connecte Designated Agent: Identif	Affiliated Committee X J	STATE A	
Connecte Designated Agent: Identification Full Name Mailing Address	Affiliated Committee X J		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	Affiliated Committee X J fy by name, address (phone number – optional) CITY CITY Cries: 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	Affiliated Committee X J fy by name, address (phone number – optional) CITY CITY Cries: 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 Depositor	Affiliated Committee X J fy by name, address (phone number – optional) CITY CITY Cries: 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 Deposited safety deposit boxes or make the content of Bank,	Affiliated Committee X J fy by name, address (phone number – optional) CITY CITY Cries: 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 Deposite safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee X J fy by name, address (phone number – optional) CITY CITY Cries: 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 Deposite safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee X J fy by name, address (phone number – optional) CITY CITY Cries: 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

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
TILLIS AND COLLE	AGUES VICTORY COMMITTEE		
Mailing Address	228 S. WASHINGTON ST.		
Mailing Address	STE. 115		
			20244
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Represent	ative Leadership PAC S
Connecte	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC S
Connecte		t Fundraising Represent	Leadership PAC S
Connecte esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
Connecte esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC S
Connecte esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	
Connecte esignated Agent: Identi	fy by name, address (phone number – optional)		
Connecte esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Connecte esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or make the second content of the co	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Connecte esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety 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
Esignated Agent: Identification of the composite of the c	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 of the composite of the c	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

h). Joint Fundraisi	3		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	A Committee Affiliated Committee Laint Found		a an Landauskin DAG Gran
CORNYN VICTORY	d Organization, Affiliated Committee, Joint Fundi COMMITTEE	raising nepresentative	e, or Leadership PAC Spon
Mailing Address	PO BOX 13026		
	AUSTIN	, , , , , , TX ,	78711
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee X 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 Full Name Mailing Address	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
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
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	fy by name, address (phone number – optional) CITY CITY Telepories: 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 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	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representati	ve, or Leadership PAC Spon
RON JOHNSON VIO	CTORY		
Mailing Address	P.O. BOX 1159		
	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	OSHKOSH	, wi	54903
Relationship:	CITY ▲	STATE 4	▲ ZIP CODE ▲
	ed Organization Affiliated Committee X	loint Fundraising Represer	Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional		
esignated Agent: Identi	fy by name, address (phone number – optional		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in wh	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 mane of Bank,	fy by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone 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 numbe	C
2.		FEC ID numbe	C
3.		FEC ID numbe	C
4.		FEC ID numbe	C
-	Organization, Affiliated Committee, Joint	Fundraising Representat	ive, or Leadership PAC Spon
LA VICTORY			
Mailing Address	PO BOX 80505		
	BATON ROUGE	LA LA	70898
Relationship:	CITY ▲	STATE	▲ ZIP CODE ▲
Connecte		Joint Fundraising Represe	ntative Leadership PAC Sp
Connecte	d Organization Affiliated Committee		ntative Leadership PAC Sp
Connecte	d Organization Affiliated Committee		ntative Leadership PAC Sp
esignated Agent: Identification	d Organization Affiliated Committee		ntative Leadership PAC Sp
esignated Agent: Identification	d Organization Affiliated Committee		ntative Leadership PAC Sp
esignated Agent: Identification	Affiliated Committee Ty by name, address (phone number – option		
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee Ty by name, address (phone number – option	al)	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Ty by name, address (phone number – option CITY CITY Pries: List all banks or other depositories in validations funds.	al) 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.	Affiliated Committee Ty by name, address (phone number – option CITY CITY Pries: List all banks or other depositories in validations funds.	al) STATE Telephone Number which the committee depo	ZIP CODE A

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

(h). Joint Fundraisir	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e. or Leadership PAC Spons
AMERICA IS BACK			
Mailing Address	425 2ND ST NE		
	WASHINGTON	DC DC	20002
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	Leadership 1 AO Op
esignated Agent: Identif			Leadership 1 AO Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership FAO Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)		ZIP CODE A
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION hks or Other Depositor ety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in whi aintains funds.	STATE A Telephone Number ch the committee deposit	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in whi aintains funds.	STATE Telephone Number ch the committee deposit	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fo	undraising Representativ	e, or Leadership PAC Spons
SENATE MAJORITY	ACTION FUND		
Mailing Address	425 2ND ST NE		
	WASHINGTON	DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X	Joint Fundraising Represent	ative Leadersnip PAC Spo
Designated Agent: Identi			ative Leadersnip PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi			ative Leadersnip PAC Spo
Designated Agent: Identing Full Name Mailing Address	by by name, address (phone number – optiona		ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	by by name, address (phone number – optiona		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	cy by name, address (phone number – optional control of the contro	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name	cy by name, address (phone number – optional control of the contro	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	С
2.		FEC ID number	С
3		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
BRITT SENATE VIC			
Mailing Address	250 COMMERCE STREET		
	3RD FLOOR SUITE 6		
	MONTGOMERY	AL	36104
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identif	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name			
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A
Full Name _ _ Mailing Address TITLE OR POSITION	CITY ▲ pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or main to the safety deposit boxes or main to the safety depository, etc.	CITY A cries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	s funds, holds accounts, rents

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

1	g Participant:		
		FEC ID number	С
2		FEC ID number	С
3.	<u> </u>	FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint F	ındraisina Banrasantativ	e or Leadershin PAC Snons
FISCHER VICTORY			e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON ST.		
	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name			
Mailing Address			
	OITV A	OTATE .	ZIP CODE A
	▼ CITY ▲	STATE ▲	
TITLE OR POSITION			ZIF GODL A
1	· 	Telephone Number	
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ries: List all banks or other depositories in waintains funds.		ts funds, holds accounts, rents
	ries: List all banks or other depositories in waintains funds.	nich the committee deposi	ts funds, holds accounts, rents

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	er C
2.			FEC ID numbe	er C
3.			FEC ID numbe	er C
4.			FEC ID numbe	er C
	of Any Connected C	Organization, Affiliated Committee, Joint	Fundraising Representa	tive, or Leadership PAC Sponsor
N	Mailing Address	228 S WASHINGTON ST STE 115		
		ALEXANDRIA	VA	22314
F	Relationship:	CITY ▲	STATE	▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee	X Joint Fundraising Represe	entative Leadership PAC Sponsor
8. Design	nated Agent: Identify	by name, address (phone number - optic	onal)	
Ful	II Name	<u> </u>		
Ма	uiling Address			
TI	TLE OR POSITION '	▼ CITY ▲	STATE 4	ZIP CODE A
L			Telephone Number	1 1_1 1_1 1
			reiepnone Number	
safety (or Other Depositori deposit boxes or main of Bank, tory, etc.	es: List all banks or other depositories in ntains funds.		osits funds, holds accounts, rents
safety of Name of Deposit	deposit boxes or main of Bank,	es: List all banks or other depositories in ntains funds.		osits funds, holds accounts, rents
safety of Name of Deposit	deposit boxes or main of Bank, tory, etc.	es: List all banks or other depositories in ntains funds.		osits funds, holds accounts, rents
safety of Name of Deposit	deposit boxes or main of Bank, tory, etc.	es: List all banks or other depositories in ntains funds.		posits funds, holds accounts, rents

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

(h). Joint Fundraisir	• •		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e or Leadershin PAC Snons
TEAM SUNUNU			
Mailing Address	824 S. MILLEDGE AVE		
	STE.101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee X	oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif			ative Leadership PAC Spo
Designated Agent: Identif			ative Leadership PAC Spo
Designated Agent: Identif			ative Leadership PAC Spo
Designated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional		Leadership PAC Spo
Pesignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	y by name, address (phone number – optional CITY A CITY A ries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Cafety deposit boxes or management of Bank,	y by name, address (phone number – optional CITY CITY ries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number ich the committee deposi	ZIP CODE A

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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	C
	d Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
ASHLEY MOODY V	ICTORY FUND		
	<u> </u>		
	301 W. PLATT ST		
Mailing Address			
	#A663 		
	TAMPA 	FL L	33606
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee X Joint	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	ify by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ify by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	ify 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 management of the position	ify 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	ify 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,	ify 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	ify 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	ify by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2			FEC ID number	C
3			FEC ID number	С
4			FEC ID number	С
	Any Connected C	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
Mai	ling Address	7620 RIVERS AVE		
		STE 370, #312		
		NORTH CHARLESTON	SC	29406
Rela	ationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sponsor
8. Designate	ed Agent: Identify	by name, address (phone number - optional)		
8. Designate		by name, address (phone number – optional)		
Full N		by name, address (phone number – optional)		
Full N	lame	by name, address (phone number – optional)		
Full N	lame	by name, address (phone number – optional)		
Full N Mailin	dame	CITY	STATE A	ZIP CODE A
Full N Mailin	lame	CITY A		ZIP CODE A
Full N Mailin	dame	CITY A	STATE State	ZIP CODE A
Full N Mailin TITL	g Address E OR POSITION	CITY A	elephone Number	
Full N Mailin TITL	g Address E OR POSITION	CITY A CITY A es: List all banks or other depositories in which	elephone Number	
Full N Mailin TITL	g Address E OR POSITION Other Depositoriosit boxes or main	CITY A CITY A es: List all banks or other depositories in which	elephone Number	
9. Banks or safety dep	g Address E OR POSITION Other Depositoriosit boxes or main Bank, y, etc.	CITY A CITY A es: List all banks or other depositories in which	elephone Number	
9. Banks or safety dep	g Address E OR POSITION Other Depositoriosit boxes or main	CITY A CITY A es: List all banks or other depositories in which	elephone Number	
9. Banks or safety dep	g Address E OR POSITION Other Depositoriosit boxes or main Bank, y, etc.	CITY A CITY A es: List all banks or other depositories in which	elephone Number	

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5(g) or (h).	Joint Fundraising	Participant:			
1.				FEC ID number	C
2.				FEC ID number	C
3. [FEC ID number	C
4. [FEC ID number	C
	of Any Connected C	Organization, Affiliated Comm	ittee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
V	Mailing Address	228 S WASHINGTON ST STE	: 115 		
		ALEXANDRIA		, VA	22314
F	Relationship:	CITY	A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Cor	mmittee X Joint Fu	ndraising Representa	tive Leadership PAC Sponsor
8. Design	ated Agent: Identify	by name, address (phone nun	nber – optional)		
Ful	I Name				
Ма	iling Address				
TI	TLE OR POSITION	CITY A		STATE ▲	ZIP CODE A
τι	TLE OR POSITION	CITY	1	STATE ▲	ZIP CODE A
9. Banks safety of Name of		es: List all banks or other dep	Telep	hone Number	
9. Banks safety of Name of Deposition	or Other Depositorideposit boxes or main	es: List all banks or other dep	Telep	hone Number	
9. Banks safety of Name of Deposition	or Other Depositorideposit boxes or main of Bank, tory, etc.	es: List all banks or other dep	Telep	hone Number	
9. Banks safety of Name of Deposition	or Other Depositorideposit boxes or main of Bank, tory, etc.	es: List all banks or other dep	Telep	hone Number	

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

1					
			FEC I	D number	С
2.			FEC I	D number	C
3.			FEC I	D number	C
4.			 FEC I	D number	С
Name of Any Connected KARI LAKE VICTOR		Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 34341				
	PHOENIX			L AZ ⊥	85067
Relationship:		CITY A		STATE A	ZIP CODE ▲
Full Name					
Mailing Address					
Mailing Address					
Mailing Address					
Mailing Address TITLE OR POSITION	\	CITY A		STATE A	ZIP CODE A
TITLE OR POSITION		1	Telephone N		ZIP CODE A
TITLE OR POSITION	ories: List all banks or oth			Number	ZIP CODE ZIP CODE ts funds, holds accounts, rents
TITLE OR POSITION	ories: List all banks or oth	ner depositories in v	which the comm	Number	
TITLE OR POSITION Banks or Other Depositor Cafety deposit boxes or management of Bank,	ories: List all banks or oth	ner depositories in v	which the comm	Number	ts funds, holds accounts, rents
TITLE OR POSITION Banks or Other Depositor Banks of Bank, Depository, etc.	ories: List all banks or oth	ner depositories in v	which the comm	Number	ts funds, holds accounts, rents

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

h). Joint Fundraisi	.g . a		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
7.			
ame of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spon
KEEP THE SENATE			
Mailing Address	421 OFFICE PARK DR		
	MOUNTAIN BROOK	, , , , AL	35223
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	Ative Leadership PAC Sp
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esignated Agent: Identi	by pame, address (phone number – optional) CITY	STATE A	
esignated Agent: Identing Full Name Mailing Address	y by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY A cries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	CITY A cries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY A cries: List all banks or other depositories in white aintains funds.	STATE A Telephone Number	ZIP CODE A

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1.			
		FEC ID number	C
2.		FEC ID number	С
3		FEC ID number	C
4		FEC ID number	C
lame of Any Connected	I Organization, Affiliated Committee, Joint Fu	ndraising Representati	ve, or Leadership PAC Spon
Mailing Address	PO BOX 1639		
	BETHANY	OK OK	73008
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name			
Full Name	CITY	STATE A	ZIP CODE A

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

5(g) or (h).	Joint Fundraising	Participant:					
1.			FEC I	D number	С		
2. [FEC I	D number	С		
3. [FEC I	D number	С		
4. [FEC I	D number	С		
	of Any Connected O	rganization, Affiliated Committee, Join	Fundraising Re	presentativ	e, or Leade	ership PAC	Sponsor
N	failing Address	901 N WASHINGTON ST					
		SUITE 700					
		ALEXANDRIA		VA	22314	-	
R	delationship:	CITY ▲		STATE ▲		ZIP COD	E 🛦
 8. Design	Connected C	Organization Affiliated Committee by name, address (phone number – optic	X Joint Fundraisin	ng Represent	ative	Leadership F	PAC Sponsor
	Name	y name, address (phone names) — opin		1 1 1 1			
	iling Address						
	Ü						
		l		1 . 1	1	_	
TI	TLE OR POSITION V	, CITY A		STATE A		ZIP CODE	A
L	LE OR FOSITION V		Telephone N	Number			
	deposit boxes or main of Bank,	es: List all banks or other depositories in tains funds.	which the comm	ittee deposit	s funds, ho	lds account	s, rents
ı	ory, etc.						
ı						1-1	

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 , NRSC FUTURE FUI	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
NICO I OTORE I O			
Mailing Address	421 OFFICE PARK DRIVE		
Maining / Idanoss			
	MOUTAIN BROOK	ı ALı	35223
Delete dele			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
Connecte		t Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
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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 anks or Other Deposite	fy 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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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY 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: 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 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

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
SCOTT DIGITAL VIO	CTORY FUND		
Mailing Address	425 2ND ST NE		
	WASHINGTON	DC	20002
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 means of Bank,	CITY A pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY CITY pries: List all banks or other depositories in whi aintains funds.	STATE Telephone Number ch the committee deposit	s funds, holds accounts, rents

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

h). Joint Fundraisi			
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
SUCCESS FOR THE	E FUTURE FUND		
Mailing Address	824 S MILLEDGE AVE STE 101		
Mailing Address			
	ATHENS		30605
D. 1. 1.		GA L	
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
		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 Representation	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identii Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
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 Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management are of Bank,	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management are of Bank,	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
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 Te	STATE A	ZIP CODE A

Page	of 82	
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5(g) or (h).	Joint Fundraising	Participant:				
1.				FEC ID n	umber C	
2.				FEC ID n	umber C	
3.				FEC ID n	umber C	
4.				FEC ID n	umber C	
	of Any Connected (Organization, Affilia	ted Committee, Joint I	undraising Repres	sentative, o	r Leadership PAC Sponsor
N	Mailing Address	PO BOX 72100				
		NEWPORT			KY	41072
F	Relationship:		CITY A	S	TATE A	ZIP CODE ▲
				Joint Fundraising R	epresentative	Leadership PAC Sponsor
8. Design	nated Agent: Identity	by name, address (phone number – option	al)		
Ful	II Name					
Ма	iling Address					
		1		1 1	1	1 1 1
TI						
- 11	TLE OR POSITION	▼	CITY A	STA	ATE A	ZIP CODE ▲
	TLE OR POSITION	▼	CITY A	STA		ZIP CODE A
9. Banks safety (ies: List all banks o		Telephone Num	ber	ZIP CODE ZIP CODE nds, holds accounts, rents
9. Banks safety (or Other Depositor deposit boxes or main of Bank,	ies: List all banks o		Telephone Num	ber	
9. Banks safety of Name of Deposit	or Other Depositor deposit boxes or mai of Bank, tory, etc.	ies: List all banks o		Telephone Num	ber	
9. Banks safety (or Other Depositor deposit boxes or mai of Bank, tory, etc.	ies: List all banks o		Telephone Num	ber	

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

5(g) or (h).	. Joint Fundraisir	g Participant:			
-	1.		FEC I	D number	С
4	2		FEC I	D number	С
(3.		FEC I	D number	С
4	4		FEC I	D number	C
	TEAM HUSTED	Organization, Affiliated Committee,	Joint Fundraising Re	presentative	, or Leadership PAC Sponsor
L					
L					
	Mailing Address	PO BOX 6290			
		COLUMBUS	1	OH	43206
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee	y Joint Fundraisin	g Representa	tive Leadership PAC Sponsor
8. Des i	ignated Agent: Identif	y by name, address (phone number –	optional)		
	Full Name				
	Full Name				
	Mailing Address	CITY A		STATE A	ZIP CODE A
		CITY A	Telephone N		ZIP CODE A
	Mailing Address TITLE OR POSITION	•			ZIP CODE A
 9. Ban	Mailing Address TITLE OR POSITION	ries: List all banks or other depositori		Number	
9. Ban safe	Mailing Address TITLE OR POSITION Aks or Other Depositor Ety deposit boxes or mail	ries: List all banks or other depositori		Number	
9. Ban safe Nam	Mailing Address TITLE OR POSITION	ries: List all banks or other depositoriaintains funds.		Number	funds, holds accounts, rents
9. Ban safe Nam	Mailing Address TITLE OR POSITION Liks or Other Depositor by deposit boxes or maine of Bank,	ries: List all banks or other depositoriaintains funds.	es in which the comm	Number	funds, holds accounts, rents
9. Ban safe Nam	Mailing Address TITLE OR POSITION Liks or Other Depositor of Bank, pository, etc.	ries: List all banks or other depositoriaintains funds.	es in which the comm	Number	funds, holds accounts, rents
9. Ban safe Nam	Mailing Address TITLE OR POSITION Liks or Other Depositor of Bank, pository, etc.	ries: List all banks or other depositoriaintains funds.	es in which the comm	Number	funds, holds accounts, rents

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

	g Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fo	ındraising Representativ	e, or Leadership PAC Spons
TEAW WARSHALL II			
Mailing Address	PO BOX 26141		
	ALEXANDRIA	VA VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identif	y by name, address (phone number - optiona)	
Full Name	y by name, address (phone number – optiona)	
	y by name, address (phone number – optiona		
Full Name	y by name, address (phone number – optiona		
Full Name	CITY A	STATE A	ZIP CODE A
Full NameMailing Address	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors of Banks or Mame of Bank,	CITY A ries: 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 Depositors of Bank, Depository, etc.	CITY A ries: 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

(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
Name of Any Connected	l Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spons
TEAM ROGERS			
Mailing Address	PO BOX 132		
Mailing Address			
	ST. JOSEPH		
Relationship:	CITY A		
Relationship:	GHY A	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	Affiliated Committee X Jo		
Connecte Designated Agent: Identif	Affiliated Committee X Jo	oint Fundraising Represent	Ative Leadership PAC Special Leadership Leadership PAC Special Leadership
Connecte Designated Agent: Identification Full Name Mailing Address	Affiliated Committee X Jo		
Connecte Designated Agent: Identification Full Name Mailing Address	Affiliated Committee X Jo	STATE A	
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	Affiliated Committee X Journal of the state	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 content of th	Affiliated Committee X Journal of the state	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	Affiliated Committee X Journal of the state	STATE A Telephone Number	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, and the co	Affiliated Committee X Journal of the state	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 composition of Bank, Depository, etc.	Affiliated Committee X Journal of the state	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 composition of Bank, Depository, etc.	Affiliated Committee X Journal of the state	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	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 Fo	ındraising Representativ	e, or Leadership PAC Spons
_	ITY COMMITTEE 2028		
Mailing Address	PO BOX 97275		
	RALEIGH	NC NC	27624
Relationship:	CITY A	STATE A	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number - optiona)	
Pesignated Agent: Identi	fy by name, address (phone number – optiona)	
	fy by name, address (phone number – optiona		
Full Name	fy by name, address (phone number – optiona		
Full Name	fy by name, address (phone number – optiona		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name _ _ Mailing Address	CITY ▲ CITY ▲ pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank,	CITY ▲ CITY ▲ pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the property of the position of Bank, Depository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the property of the position of Bank, Depository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	s funds, holds accounts, rents

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	of	of ⁸²

(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connecte	d Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Sponse
WHATLEY VICTOR	Y COMMITTEE		
Mailing Address	PO BOX 97275		
	1		
	RALEIGH	NC	27624
Relationship:	CITY A	STATE A	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Spo
Connect		oint Fundraising Represent	ative Leadership PAC Spo
Connect	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X Joint Joi	oint Fundraising Represent	Leadership PAC Spo
Connect Designated Agent: Ident Full Name Mailing Address	ed Organization Affiliated Committee X Joint Joi		
Connect Designated Agent: Ident Full Name Mailing Address	ed Organization Affiliated Committee X Joint Joi	STATE A	
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ed Organization Affiliated Committee X Joint Joi	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit afety deposit boxes or research.	ed Organization Affiliated Committee X Joint Joi	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ed Organization Affiliated Committee X Joint Joi	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or related to the position of Bank,	ed Organization Affiliated Committee X Joint Joi	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or related to the position of Bank, Depository, etc.	ed Organization Affiliated Committee X Joint Joi	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or related to the position of Bank, Depository, etc.	ed Organization Affiliated Committee X Joint Joi	STATE A Telephone Number	ZIP CODE A