Only

STATEMENT OF

PAGE 1 / 10 -

FORM 1		0	RGAN	IZA	ATIC	NC														
1. NAME OF COMMITTEE (in	full)		Check if nam s changed)	е		mple:		ng, ty	/ре		12	FE	4M5	-	Office	Use	Only			
Mullin For A	merica	l	1	1 1															1 1	
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ADDRESS (number of		PO Box 1	1632																	
ADDRESS (number a	•																			
is changed	1)	Oklahom	a City TY ▲								LOI STA	K TE 4	<u> </u>	73	101		 ZIP)E ▲	
COMMITTEE'S E-MA	AL ADDRI	ESS																		
(Check if a is changed		llisker@	hdafec.com																	
	-,		Second E-Ma	ail Addı	ress					ı	ı	l l	ı	ı	1	ı			1 1	, I
COMMITTEE'S WEB (Check if a is changed	address	•	RL) linforamerica.c	com																
2. DATE 07	M / D	5 / Y	y y y 2025																	
3. FEC IDENTIFIC	CATION N	IUMBER ▶		C00	049834	15														
4. IS THIS STATEN	MENT	NEW	(N) O	R	×		AMEN	IDED	(A)											
certify that I have e	examined t	this Stateme	nt and to the	best o	of my	knowle	edge	and b	elief	it is	true	e, co	rrec	t and	d co	mple	te.			
Type or Print Name o	of Treasure	er <u>Lisker, L</u>	isa, , ,																	
Signature of Treasure	er L <u>isk</u>	er, Lisa, , ,								С	ate		М 07	M	/	15	1	Y	2025	
NOTE: Submission of	false, error		omplete inform												per	altie	s of	52 U	.S.C.	§30109
Office Use						Feder	urther al Elec	tion C	ommi		tact:							RN 6/201		

Toll Free 800-424-9530

Local 202-694-1100

E	EC Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) X This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	candidate
	Name of Candidate Mullin, Markwayne, , Mr.,	
	Candidate Party Affiliation REP Office Sought: House X Senate President	State OK District 00
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican,	etc.) Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	I organization is a:
	Corporation Corporation w/o Capital Stock Labor Organical Stock	ganization
	Membership Organization Trade Association Cooperation	ive
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	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 accounts (Hybrid PAC	O).
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1	

I	FEC Form 1 (Revised 0)	2/2009)		Page 3
۷	Vrite or Type Committee Name			
6.	Mullin For Americ Name of Any Connected Or	Cd ganization, Affiliated Committee, Jo	oint Fundraising Represent	ative, or Leadership PAC Sponsor
	Mullin Victory Fund			
	Mailing Address	228 S. Washington St		
	. J	Ste. 115		
		Alexandria	VA	22314
		CITY ▲	STAT	E ▲ ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	X Joint Fundraising Repr	esentative Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number	optional) and position of the p	person in possession of committee
	Lisker, Lisa	,,,		
	Full Name	200 C. Washinston Ct		
	Mailing Address	228 S. Washington St.		
		Ste. 115		
		Alexandria	VA	22314
		CITY ▲	STAT	E ▲ ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number	703 - 549 - 7705
8.	any designated agent (e.g., a	d address (phone number optional) essistant treasurer).	of the treasurer of the comr	nittee; and the name and address of
	Full Name Lisker, Lisa of Treasurer	,,, 		
	Mailing Address	228 S. Washington St.		
	maining / taa. 555	Ste. 115		
		Alexandria	V	22314
		CITY ▲	STAT	E ▲ ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number	703 - 549 - 7705

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent		1 1 1 1 1 1 1	
Mailing Address			
		STATE A	ZIP CODE ▲
Title or Position	7		
	Telephone numb	oer	
. Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committee xes or maintains funds.	deposits funds, hole	ds accounts, rents
Name of Bank, [Depository, etc.		
	Firstar Bank		
Mailing Address	510 North Main St.		
	Muskogee	OK 74401	
	CITY ▲ S	STATE A	ZIP CODE ▲
Name of Bank, D	Depository, etc.		
	Truist		
Mailing Address	1445 New York Ave., NW		
	Washington	DC 20005	
	CITY ▲ S	STATE A	ZIP CODE ▲

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

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected , CORNYN VICTORY	OCAMATTEE	draising Representative	e, or Leadership PAC Spons
CORNYN VICTORY			
Mailing Address	PO BOX 13026		
	AUSTIN		78711
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte Connecte Connecte Connecte Connecte Connecte Connecte	ed Organization Affiliated Committee X Joint Joi		
Designated Agent: Identi			
Pesignated Agent: Identi			
Pesignated Agent: Identi			
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Identi	fy by name, address (phone number – optional)	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite the safety deposit boxes or management of the safety deposit boxes or management.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	Telephone Number	
Pesignated Agent: Identify Full Name	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which anintains funds. Bridge Bank	Telephone Number	
Pesignated Agent: Identify Full Name	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which anintains funds. Bridge Bank	Telephone Number	

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

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1						
2				FE	C ID number	С
				FE	C ID number	С
3.				FE	C ID number	С
4				FE	C ID number	С
Name of Any Cor	nnected O	ganization, Aff	iliated Committee, Jo	int Fundraising	Representativ	e, or Leadership PAC Spons
OKLAHOMA S	STRONG					
Mailing Addre	ress	228 S WASHIN	IGTON ST			
		STE 115				
		ALEXANDRIA			VA	22314
Relationship:	:		CITY A		STATE ▲	ZIP CODE ▲
	Connected C		Affiliated Committee	➤ Joint Fundr	aising Represent	ative Leadership PAC Sp
Pesignated Agent	t: Identify b				aising Represent	ative Leadership PAC Sp
Designated Agent	t: Identify b				aising Represent	ative Leadership PAC Sp
Pesignated Agent Full Name	t: Identify b				aising Represent	ative Leadership PAC Sp
Pesignated Agent	t: Identify b		es (phone number – op			
Pesignated Agent	t: Identify b				aising Represent	Ative Leadership PAC Sp

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

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raue	OI.		

1.				
٠		FEC I	D number	C
2.		FEC I	D number	С
3.		FEC I	D number	С
4.		FEC I	D number	С
lame of Any Connecte	d Organization, Affiliated Committee, J	oint Fundraising Re	presentative	e, or Leadership PAC Spon
ONE TEAM SENAT	E MAJORITY			
	404 055105 DADI/ DDIV/5			
Mailing Address	421 OFFICE PARK DRIVE			
	MOUNTAIN BROOK		AL	35223
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	X Joint Fundraisin	ng Representa	Leadership PAC Sp
			ng Representa	Leadership PAC Sp
esignated Agent: Ident			ng Representa	Leadership PAC Sp
esignated Agent: Ident			ng Representa	Leadership PAC Sp
esignated Agent: Ident			ng Representa	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – o		Representation of the second o	Leadership PAC Sp
Pesignated Agent: Ident	ify by name, address (phone number – o		STATE A	

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

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h). Joint Fundraisi	ig i ai dolpant.		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Jofy by name, address (phone number – optional)	oint Fundraising Representa	Leadership PAC S
		int Fundraising Represent	Leadership FAC S.
esignated Agent: Identi		int Fundraising Represent	Leadership FAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership FAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	city by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
BRITT SENATE VIC	TORY		
Mailing Address	250 COMMERCE STREET		
	3RD FLOOR SUITE 6		
	MONTGOMERY	AL	36104
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecto	ed Organization Affiliated Committee X Joints Joint J	int Fundraising Represent	ative Leadership PAC Sp
Connecto		int Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1.			FEC ID num	ber C	
2.			FEC ID num	ber C	
3.			FEC ID num	ber C	
4.			FEC ID num	ber C	
ame of Any Connec	ed Organization, Affilia	ated Committee, Joint	Fundraising Represen	tative, or I	Leadership PAC Spons
2025 SENATORS	CLASSIC COMMITT	EE 			
	ı 228 S WASHINGT	ION STREET			
Mailing Address					
	SUITE 115				
				۱ ۱	22314
	ALEXANDRIA				
			STAT Joint Fundraising Repre		ZIP CODE ▲ Leadership PAC Sp
Conne	cted Organization	Affiliated Committee X	Joint Fundraising Repre		
Conne	cted Organization	Affiliated Committee X	Joint Fundraising Repre		
esignated Agent: Ide	cted Organization	Affiliated Committee X	Joint Fundraising Repre		
esignated Agent: Ide	cted Organization	Affiliated Committee X	Joint Fundraising Repre		
esignated Agent: Ide Full Name Mailing Address	cted Organization Antify by name, address	Affiliated Committee X	Joint Fundraising Repre	esentative	
esignated Agent: Ide	cted Organization Antify by name, address	Affiliated Committee (phone number – option	al)	esentative	Leadership PAC Sp