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. NRCC 320 FIRST STREET SE ADDRESS (number and street) (Check if address is changed) WASHINGTON 20003 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address kdavis@hdafec.com is changed) Optional Second E-Mail Address kwilliams@nrcc.org COMMITTEE'S WEB PAGE ADDRESS (URL) www.nrcc.org (Check if address is changed) DATE 2024 C00075820 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 Davis, Keith A.,, Date 06 20 2024 Signature of Treasurer Davis, Keith A., , , 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

E	EC Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) 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.)	e candidate
	Name of Candidate	
	Candidate Office Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	Name of Candidate	
	Party Committee:	
	(d) This committee is a NAT (National, State or subordinate) committee of the REP (Democratic Republican,	c, , etc.) Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	Corporation Corporation w/o Capital Stock Labor C	Organization
	Membership Organization Trade Association Coopera	ative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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 PA	₹C).
	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Committees Participating in Joint Fundraiser	
	1C	

	FEC Form 1 (Revised 0	2/2009)	Page 3
V	rite or Type Committee Name		
	NRCC		
i.	_	ganization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor.
	COLE COMBINED C	DMMITTEE	
	1		
		12176 CHANCERY STATION CIRCLE	
	Mailing Address	12176 CHANCERY STATION CIRCLE	
		RESTON VA :	20190
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
	_		
_			
	Custodian of Records: Identi books and records.	y by name, address (phone number optional) and position of the person in p	ossession of committee
	-		
	Davis, Keith	A.,,,	
		320 First Street SE	
	Mailing Address		
		Washington DC 1	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	202 	- 479 - 7000
		Telephone number	
	Treasurer: List the name and	address (phone number optional) of the treasurer of the committee; and	the name and address of
	any designated agent (e.g., a		the name and address of
	Full Name Davis, Keitl	A., , ,	
	of Treasurer		
	Mailing Address	320 First Street SE	
		Washington DC 1	20003
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	Treasurer	, 202	479 7000
		Telephone number	

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated	Williams, Katy, , ,		
Agent			
Mailing Address	320 First Street SE		
	Washington 	DC	20003
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasu	rer Telephone r	number 2	202 - 479 - 7000
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the common xes or maintains funds.	nittee deposits f	funds, holds accounts, rents
Name of Bank, [Depository, etc.		
	Wells Fargo		
Mailing Address	1753 Pinnacle Drive		
	McLean	VA L	22102
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, [Depository, etc.		
	Country Club Bank		
Mailing Address	P.O. Box 410889		
	Kansas City	MO	64141
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Assa Comments	d Ownerication Affiliated Occurring Laint For	desiries Deservation	a and and and in DAO Course
MANN VICTORY FU	d Organization, Affiliated Committee, Joint Fur	draising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 1084		
	SALINA	KS	67402
Dalatianahia	CITY A	STATE ▲	ZIP CODE ▲
		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	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
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Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or necessity.	ed Organization	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Depositions boxes or not be and the composition of Bank, Depository, etc.	ed Organization	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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1			FEC	C ID number	С
2.			FEC	C ID number	С
3.			FEC	C ID number	C
4.			FEC	C ID number	C
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LATURNER V		<u> </u>			
Mailing Addre	ess PO E	BOX 67237			
	L				
	TOP	PEKA		KS	66667
Relationship:		CITY A		STATE A	ZIP CODE ▲
Пс	Connected Organiz	zation Affiliated Committee	X Joint Fundrai	ising Represent	ative Leadership PAC Spor
Full Name					
Mailing Address	s				
	L				
TITLE OR PO	OSITION ▼	CITY A		STATE ▲	ZIP CODE ▲
		1			
		'	Telephone	e Number	- -

FEC Form 1S (Revised 02/2017)

	sing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
-	ed Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponso
Mailing Address	PO BOX 244		
Relationship:	CLINTON CITY A	NY NY STATE ▲	13323 ZIP CODE ▲
Connec	ted Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Spo
Designated Agent: Iden	tify by name, address (phone number - optional)		
Full Name			
Full Name			
	CITY A	STATE A	ZIP CODE A
Mailing Address	N V	STATE Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITIO	tories: List all banks or other depositories in which maintains funds.	Telephone Number	
Mailing Address TITLE OR POSITION Banks or Other Depositions boxes or the safety deposit boxes or the safety dep	tories: List all banks or other depositories in whice maintains funds. Bank	Telephone Number	

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
KELLER VICTORY	COMMITTEE		
Mailing Address	4031 THICKET LANE		
	HARRISBURG	PA PA	17110
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joinfy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY CITY pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	sing Participant:		
1		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
Mailing Address	22780 INDIAN CREEK DR.		
	SUITE 100		
Relationship:	DULLES CITY	VA VA STATE ▲	20166 ZIP CODE ▲
r totationip.	OII I	SIAIL	ZII GODE A
	ntify by name, address (phone number – optional)		
Full Name	ntify by name, address (phone number – optional)		
	ntify by name, address (phone number – optional)		
Full Name	ntify by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depose Safety deposit boxes or Name of Bank, Depository, etc.	ON ▼ CITY ▲ Telestitories: List all banks or other depositories in which	elephone Number	
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Full Name Mailing Address TITLE OR POSITION Banks or Other Depose Safety deposit boxes or Name of Bank, Depository, etc.	CITY ▲ CITY ▲ Citories: List all banks or other depositories in which maintains funds. Crest Bank	elephone Number	

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Name of Any ASHLEY F	HINSON VICT	ORY COMMITT			-	
ASHLEY F	HINSON VICT	ORY COMMITT		t Fundraising Re	presentative	, or Leadership PAC Spons
ASHLEY F	HINSON VICT	ORY COMMITT		t Fundraising Re	presentative	, or Leadership PAC Spons
Mailing A			EE			
·	Address	P.O. BOX 341027				
·	Address	P.O. BOX 341027				
·						
Relations						
Relations		AUSTIN			TX	78734
	ship:		CITY A		STATE A	ZIP CODE ▲
	Connected C	organization A	Affiliated Committee	X Joint Fundraisin	na Representa	tive Leadership PAC Spo
Full Name						
Mailing Ad	aress					
TITLE OF	POSITION T		CITY ▲		STATE ▲	ZIP CODE ▲
				Telephone N	lumber	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
THE VALADAO VIC	d Organization, Affiliated Committee, Joint Fund TORY FUND	iraising Hepresentative	e, or Leadership PAC Spons
Mailing Address	5132 N PALM AVE		
	NUM 227		
	FRESNO	CA CA	93704
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
		nt Fundraising Representa	ative Leadership PAC Sp
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FEC Form 1S (Revised 02/2017) for Lines 5(g)

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

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2. 🔟				FEC I	D number	С
3.				FEC I	D number	С
4.			1 1 1 1 1 1 1 1	 FEC I	D number	С
Name of /	Any Connected	Organization Affil	isted Committee Joint	Eundraining Do	nrocentativ	o ar Loodovahin DAC Spono
LONG	-	Organization, Aiiii	lated Committee, Joint	rundraising Re	presentative	e, or Leadership PAC Spons
Maili	ng Address	P.O. BOX 3864				
		SPRINGFIELD			MO	65808
			CITY A		STATE A	ZIP CODE ▲
		Organization by name, address		Joint Fundraisin	g Represent	ative Leadership PAC Spo
Designated Full Na	Connected d Agent: Identify		Affiliated Committee		g Representa	ative Leadership PAC Spo
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Designated Full Na Mailing	Connected d Agent: Identify	by name, address	Affiliated Committee		STATE A	Ative Leadership PAC Spo

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

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

(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected AUSTIN SCOTT VIO	d Organization, Affiliated Committee, Joint Fun CTORY FUND	draising Representative	e, or Leadership PAC Spons
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Data Carata	CITY A	STATE ▲	ZIP CODE ▲
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0 FEC Form 1S (Revised 02/2017)

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

Page ___ **of** ____

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			FEC I	D number	С
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ORITY RISING	• · 9 · · · · · · · · · · · · · · · · · · ·			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o, or
ailing Address	P.O. BOX 3084	4			
	BETHESDA			MD	20824
lationship:		CITY A		STATE A	ZIP CODE ▲
	by name, addres	s (phone number – option	nal)		
ng Address					
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	DRITY RISING Liling Address Lationship: Connected Led Agent: Identify Name Many Address	DRITY RISING P.O. BOX 3084 BETHESDA lationship: Connected Organization ted Agent: Identify by name, address Name ng Address	DRITY RISING P.O. BOX 30844 BETHESDA Lationship: Connected Organization Affiliated Committee Affiliated Committee Affiliated Committee Affiliated Committee Affiliated Committee CITY A	FEC I	FEC ID number FE

FEC Form 1S (Revised 02/2017)

	ng Participant:			
1.		FEC	D number	C
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3		FEC	D ID number	C
4		FEC	D number	C
Name of Any Connected	Organization, Affiliated Committee	e, Joint Fundraising	Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 97275			
Relationship:	RALEIGH CITY A		NC NC STATE ▲	27624 ZIP CODE ▲
П.		V	-: D	ative Leadership PAC Spo
Designated Agent: Identi	d Organization Affiliated Committy y by name, address (phone number		gp	
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Designated Agent: Identi	_			
Designated Agent: Identi	_			
Designated Agent: Identi	y by name, address (phone number		STATE A	ZIP CODE A
Designated Agent: Identi Full Name Mailing Address	y by name, address (phone number	- optional)		
Pesignated Agent: Identic Full Name Mailing Address TITLE OR POSITION Mailing Address Banks or Other Deposition fafety deposit boxes or mailing and	y by name, address (phone number CITY CITY pries: List all banks or other deposite	- optional) Telephone	STATE A	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the sa	y by name, address (phone number CITY CITY Ories: List all banks or other deposite aintains funds. S National Bank [1800 Robert Fulton Drive]	- optional) Telephone	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
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HUDSON VICTORY	d Organization, Affiliated Committee, Joint Fun FUND	draising Representative	e, or Leadership PAC Spons
Mailing Address	824 S. MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joi	int Fundraising Representa	ative Leadership PAC Spo
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FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant.		
1.		FEC ID number	С
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3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
TEAM BUDDY			
Mailing Address	824 S. MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
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Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite Safety deposit boxes or make the proposition of Bank, Depository, etc.	Affiliated Committee X Journal of the position	STATE A Telephone Number	ZIP CODE A

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FEC Form 1S (Revised 02/2017) Fec Form 1S (Revised 02/2017) Fec Form 1S (Revised 02/2017)

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

1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
KUSTOFF VICTORY	' FUND		
Mailing Address	1661 AARON BRENNER DR		
ivialility Address	SUITE 300		
	MEMPHIS	TNI	38120
		TN	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Join y by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Spo
		t Fundraising Representa	ative Leadership PAC Spo
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Spo
Pesignated Agent: Identif		at Fundraising Representa	ative Leadership PAC Spo
Pesignated Agent: Identif		at Fundraising Representa	ative Leadership PAC Spo
Pesignated Agent: Identif	y by name, address (phone number – optional)	st Fundraising Representation	Leadership PAC Spo
Pesignated Agent: Identification Full Name Mailing Address	y by name, address (phone number – optional) CITY		

FEC Form 1S (Revised 02/2017)

	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 MALLIOTAKIS VICT	I Organization, Affiliated Committee, Joint Fund ORY COMMITTEE	raising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 68		
	SOUTH SALEM	NY	10590
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number - optional)		
Pesignated 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	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit rafety deposit boxes or many part of the posit boxes or	CITY A CITY A pries: List all banks or other depositories in which	elephone Number	
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 A CITY A pries: List all banks or other depositories in which laintains funds. prgan Chase Bank, NA	elephone Number	

FEC Form 1S (Revised 02/2017)

1.						
				FEC I	D number	С
2				FEC I	D number	С
3				FEC I	D number	С
4.				FEC	D number	C
	ny Connected		ffiliated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Spor
Mailin	g Address	PO BOX 2485				
		SPRINGFIELD)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	22152
					OTATE A	ZIP CODE ▲
Designated	Agent: Identify	d Organization	CITY A Affiliated Committee	S Joint Fundraisin	STATE Ang Represent	
Designated Full Nar	Agent: Identify		Affiliated Committee			
Designated Full Nar	Connected Agent: Identify		Affiliated Committee			
Designated Full Nar	Agent: Identify		Affiliated Committee			
Designated Full Nar Mailing	Agent: Identify me Address	by name, addre	Affiliated Committee		ng Representa	Leadership PAC S
Designated Full Nar Mailing	Agent: Identify	by name, addre	Affiliated Committee		Representation of the second o	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
		_	
-	l Organization, Affiliated Committee, Joint F	undraising Representativ	re, or Leadership PAC Spons
WESLEY HUNT VIC	CTORY FUND		
Mailing Address	PO BOX 341027		
	AUSTIN		78734
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee X fy by name, address (phone number – optional	Joint Fundraising Represental	tative Leadership PAC Spo
			tative Leadership PAC Spo
Designated Agent: Identi			tative Leadership PAC Spo
Designated Agent: Identi			tative Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional		Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional	al)	
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or many part of the position of the posit	fy by name, address (phone number – optional state of the control	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	fy by name, address (phone number – optional content of the conten	STATE A Telephone Number	ZIP CODE A

Page ___ **of** 239

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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
	rganization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
PALAZZO VICTORY F	'UND 		
Martin Adding	824 S MILLEDGE AVENUE		1
Mailing Address	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint Fo	undraising Representa	ative Leadership PAC Sponsor
	by name, address (phone number – optional)		
8. Designated Agent: Identify	by name, address (phone number – optional)		
8. Designated Agent: Identify	by name, address (phone number – optional)		
8. Designated Agent: Identify		STATE A	ZIR CODE A
8. Designated Agent: Identify	CITY A	STATE A	ZIP CODE A
8. Designated Agent: Identify Full Name	CITY A	STATE A	
8. Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	CITY Tele Ses: List all banks or other depositories in which the stains funds.	phone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fund	raising Representative	, or Leadership PAC Sponso
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number - optional)		
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	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or mailing address	CITY A CITY A pries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or management of Bank, Depository, etc.	CITY A CITY A pories: List all banks or other depositories in which laintains funds.	elephone Number	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected LESTHER JOY KING	I Organization, Affiliated Committee, Joint Fund VICTORY FUND	raising Representative	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
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 Spo
Connecte		t Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi		t Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name		t Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name		t Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposition afety deposit boxes or many and man	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Depositional Property of the Deposition of Bank, Depository, etc.	fy by name, address (phone number – optional) CITY CITY CITY Cries: List all banks or other depositories in which paintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connector	d Organization, Affiliated Committee, Joint	Fundraising Popresentativ	a or Leadership PAC Spans
GROW THE MAJOR		Tundraising Representativ	e, or Leadership FAC Spons
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA	22314
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	CITY A	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION Banks or Other Deposite safety deposit boxes or many deposit boxes or many deposit boxes.	ories: List all banks or other depositories in	Telephone Number	
TITLE OR POSITION Banks or Other Deposite to the safety deposite boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in naintains funds. Community Credit Union 3030 S. Adrian Highway	Telephone Number	ts funds, holds accounts, rents
TITLE OR POSITION Banks or Other Deposite to the safety deposite boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in naintains funds.	Telephone Number	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	· 9 · · · · · · · · · · · · · · · · · ·		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
STEFANIK- ESPOSI	TO NY VICTORY		
Mailing Address	P.O. BOX 500		
Relationship:	GLENS FALLS CITY	NY STATE ▲	12801
•			
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Sp
		Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identif		Fundraising Represent	Leadership PAC Spo
esignated Agent: Identif		Fundraising Represent	Leadership PAC Spo
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spanish
resignated Agent: Identification Full Name Mailing Address	y by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or means.	y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Deposite afety deposit boxes or malame of Bank, depository, etc.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ig i artioiparti		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected OBERNOLTE VICTO	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
OBERNOLTE VICTO			
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Join for by name, address (phone number – optional)	nt 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 Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	ZIP CODE A
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and ma	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds. I 901 Breton Road SE	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	cories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	С
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3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
COLLINS VICTORY	COMMITTEE		
Mailing Address	824 S MILLEDGE AVE		
	STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint	t Fundraising Representa	Leadership 1 Ac ope
		Trundraising nepresent	Leadership PAC Spo
Designated Agent: Identi		Trundraising nepresente	Leadership TAO ope
Designated Agent: Identi		Trundraising nepresente	
Designated Agent: Identi		Trundraising nepresente	
Designated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or many part of the position of the posit	fy by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the period of Bank, Depository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which naintains funds. Ic Union Bank [1800 Robert Fulton Drive]	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1			
2		FEC ID number	С
		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
GOODEN VICTORY	FUND		
Mailing Address	555 METRO PLACE S		
	STE. 525		
	DUBLIN	OH	43017
Relationship:	CITY A	STATE A	ZIP CODE ▲
	d Organization	Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identify	by name, address (phone number – optional)		
Designated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1.		Participant:				
				FEC ID	number	С
2.				FEC ID	number	С
3.				FEC ID	number	C
4.				FEC ID	number	С
Name of Any (Connected O	rganization, Affilia	ted Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spons
MAZI FOR	CONGRES	S 				
Mailing Ad	ddraca	228 S. WASHINGT	TON ST.			
Mailing Ac	uuless	STE. 115				
		ALEXANDRIA			ı VA ı	1 22314
Dolotional	hin	/ LE / 0 11 15 / 10 / 10 / 10 / 10 / 10 / 10	OITY			
Relationsh	пр: —	_	CITY A		STATE A	ZIP CODE ▲
Full Name						
Mailing Add	lress					
				I	1 . 1	
TITLE OR	POSITION T	,	CITY A		STATE A	ZIP CODE ▲
TITLE OR	POSITION T	, 	CITY A	Telephone No		ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
ADERHOLT MAJOR			
Mailing Address	831 LINWOOD CT		
	BIRMINGHAM	AL	35222
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecto		oint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	Leadership PAC Spo
Connecte Pesignated Agent: Identi	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo		
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Jo	sint Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Journal of the state		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit lafety deposit boxes or many many many many many many many many	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 Sanks or Other Depositional Pank, Depository, etc.	Affiliated Committee X Journal of the state	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	I Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
DIANA VICTORT TO			
Mailing Address	PO BOX 7208		
	KINGSPORT		37664
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Joi	nt Fundraising Representa	ative Leadership PAC Spo
Connecte Pesignated Agent: Identi	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	Leadership PAC Spo
Connecte Pesignated Agent: Identi Full Name	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	Leadership PAC Spo
Connecte Pesignated Agent: Identi Full Name	ed Organization Affiliated Committee X Joi	nt Fundraising Representa	Leadership PAC Spo
Connecte Pesignated Agent: Identi Full Name	Affiliated Committee X Joint J	nt Fundraising Representation	Leadership PAC Spo
Pesignated Agent: Identification Full Name Mailing Address	Affiliated Committee X Joint J		
Connected Pesignated Agent: Identification of the Position of	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Pends or Other Deposite afety deposit boxes or make the period of Bank, Perository, etc.	Affiliated Committee	STATE A Telephone Number	ZIP CODE A

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

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	С
4.		FEC ID number	С
Jame of Any Connected	l Organization, Affiliated Committee, Joint Fund	draising Representative	or Leadershin PAC Snons
GUS BILIRAKIS VIC			
Mailing Address	PO BOX 2485		
	SPRINGFIELD	VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	ı	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or many states and states are states as a second states are states.	CITY A cries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or make the deposit boxes or make the deposit boxes or make the depository, etc.	CITY ▲ CITY ▲ Ories: List all banks or other depositories in which raintains funds. Defice Bank 1000 Walnut	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or make the deposit boxes or make the deposit boxes or make the depository, etc.	CITY CITY CITY CITY	Telephone Number	

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
BIGGS VICTORY C	OMMITTEE		
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, , VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	fy by name, address (phone number - optional)		
Full Name	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name _ _ Mailing Address TITLE OR POSITION	CITY ▲ Te pries: List all banks or other depositories in which	lephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of the position of th	CITY ▲ CITY ▲ Telepries: List all banks or other depositories in which raintains funds.	lephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of the position of th	CITY ▲ CITY ▲ Te pries: List all banks or other depositories in which aintains funds. Grield First Community Bank	lephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Spring	CITY ▲ CITY ▲ Telepries: List all banks or other depositories in which raintains funds.	lephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the safety deposit boxes or make	CITY ▲ CITY ▲ Te pries: List all banks or other depositories in which aintains funds. Grield First Community Bank	lephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the safety deposit boxes or make	CITY ▲ CITY ▲ Te pries: List all banks or other depositories in which aintains funds. Grield First Community Bank	lephone Number	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponso
Mailing Address	PO BOX 183		
maining / Marioso			
	HUDSON	WI WI	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)		
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Join fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional) CITY		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposition afety deposit boxes or many and man	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the composition of Bank, Depository, etc. American	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
1			
Mailing Address	47 FLINTLOCK DR		
	SHIRLEY	NY NY	11967
		STATE ▲	ZIP CODE ▲
	CITY ▲ ed Organization	t Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connected Agent: Identification	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Join		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)		Leadership PAC Sport
Connecte resignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional)	t Fundraising Representa	
Connecte resignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Join fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
Connected Resignated Agent: Identification of Position	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
ELISE VICTORY FU	ND		
Mailing Address	PO BOX 500		
	GLEN FALLS	NY NY	12801
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Represent	Leadership 1 AO Op
		init rundiaising nepresent	ative Leadership PAC Spo
esignated Agent: Identi		IIII Fullulaising nepresent	Leadership FAO Spr
esignated Agent: Identi		IIII Fullulaising nepresent	Leadership FAO Spr
esignated Agent: Identi		IIII Fullulaising nepresent	Leadership TAO Spr
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or management.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds. Sank & Trust 909 Poydras Street	STATE A Telephone Number	ZIP CODE ZIP code s funds, holds accounts, rents
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds. Cank & Trust	STATE A Telephone Number	ZIP CODE A

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

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	I Organization, Affiliated Committee, Joint Fundi	aising Representative	e, or Leadership PAC Spons
Mailing Address	824 S. MILLEDGE AVE STE 101		
	ATHENS	GA GA	30605
		STATE ▲	ZIP CODE ▲
	clTY ▲ ed Organization	Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Joint		Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Joint		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name	Affiliated Committee X Joint fy by name, address (phone number – optional)		Leadership PAC Spo
Connecte resignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint for by name, address (phone number – optional) CITY	Fundraising Representa	
Connecte resignated Agent: Identi Full Name Mailing Address TITLE OR POSITION canks or Other Deposite afety deposit boxes or management of the content	Affiliated Committee	Fundraising Representation	ZIP CODE A
Connected Resignated Agent: Identification of Position Identification Ident	Affiliated Committee	Fundraising Representation	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisir	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 21315		
Relationship:	OKLAHOMA CITY CITY	OK STATE ▲	73156 ZIP CODE A
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – optional)		
Designated Agent: Identif	y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
Designated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Plains	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or management of the position of	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
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 – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds. Capital Bank	STATE A	ZIP CODE A
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 – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. Capital Bank 201 W. 5th Street	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

TY A Committee X Journally	FEC ID numb FEC ID numb FEC ID numb FEC ID numb Adraising Represent NY STATI Sint Fundraising Repre	per C per C per C tative, or Leadership	PAC Spons CODE A Pership PAC Spo
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Committee X Jonnumber – optional)	STATI	E A ZIF	
Committee X Jonnumber – optional)	STATI	E A ZIF	
Committee X Jonnumber – optional)	STATI	E A ZIF	
Committee X Jonnumber – optional)	STATI	E A ZIF	
Committee X Jonnumber – optional)	STATI	E A ZIF	
Committee X Jonnumber – optional)			
number – optional)	pint Fundraising Repre	esentative Leade	ership PAC Spo
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1 1 1 I	STATE	▲ ZIP (CODE A
	Telephone Number		
	ns funds.	List all banks or other depositories in which the committee dens funds.	List all banks or other depositories in which the committee deposits funds, holds ans funds.
	lepositories in who	lepositories in which the committee de	lepositories in which the committee deposits funds, holds a

FEC Form 1S (Revised 02/2017)

r(h). Joint Fundrais i	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, Affiliat	ed Committee, Joint I	Fundraising Rep	resentativ	e, or Leadership PAC Spons
BURGESS OWENS	VICTORY COMMIT	TEE			
Mailing Address	824 S MILLEDGE A	AVE STE 101			
	ATHENS			GA	30605
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
			Joint Fundraising	Hepresent	Leadership FAC Spc
Designated Agent: Ident				Hepresenta	ative Leadership PAC Spo
Designated Agent: Ident				Hepresenta	LeaderStrip FAC Spc
Designated Agent: Ident				Hepresenta	Leadership FAC Spc
Designated Agent: Ident Full Name Mailing Address	fy by name, address (p		al)	Hepresenta	ZIP CODE A
Designated Agent: Ident	fy by name, address (p	ohone number – option	al)	STATE A	
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or necessity.	fy by name, address (p	ohone number – option	al)	STATE A	ZIP CODE A
Pull Name Full Name Mailing Address TITLE OR POSITION Banks or Other Deposites afety deposit boxes or nothing the safety deposit boxes or nothing the safety deposit boxes. Name of Bank, Depository, etc.	fy by name, address (p	ohone number – option	al)	STATE A	

FEC Form 1S (Revised 02/2017)

	anararan	Participant:				
1				FEC	D number	С
2.				FEC	D number	C
3.				FEC	D number	С
4.				FEC !	D number	C
	onnected O	rganization, Affilia	ated Committee, Joint	Fundraising Re	presentative	e, or Leadership PAC Sponso
TDOCX						
Mailing Ado	dress	PO BOX 30844				
J		I				
		BETHESDA			ı MD ı	20824
Relationship	n:		CITY A		STATE A	ZIP CODE ▲
	Connected C			✓ Joint Fundraisir		
Full Name						
Mailing Addre	ess					
		<u> </u>				
		I		1		1
	OCITION -		CITY A		STATE A	ZIP CODE A
TITLE OR P	osition v	,	CITY A	Telephone I		ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
Name of Any Connecte	d Organization, Affiliated Committee, Joint F	undraising Representativ	ve, or Leadership PAC Sponso
COMER VICTORY	FUND		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA L	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee X ify by name, address (phone number – optional	Joint Fundraising Represen	Leadership FAC Spc
Designated Agent: Ident			tative Leadership PAC Spo
Designated Agent: Ident			Leadership FAC Spo
Designated Agent: Ident			Leadership FAC Spc
Designated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optiona		ZIP CODE A
Designated Agent: Ident	ify by name, address (phone number – optiona	NI)	
Pesignated Agent: Identification of the Full Name Mailing Address TITLE OR POSITIO Banks or Other Depositions of the Position of the Positio	ify by name, address (phone number – optional content of the conte	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositions boxes or respectively. Name of Bank, Pinna Depository, etc.	cify by name, address (phone number – optional content of the cont	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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 Fundr	aising Representativ	e, or Leadership PAC Spons
HISPANIC LEADERS	SHIP TRUST PARTNERSHIP		
	. DO DOX 244027		
Mailing Address	PO BOX 341027		
	AUSTIN	TX	78734
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Spo
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)		
Designated Agent: Identif	y by name, address (phone number – optional) CITY	STATE A	Ative Leadership PAC Spo

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
JOHN JAMES FOR	MICHIGAN 		
Mailing Address	P.O. BOX 628		
			<u> </u>
	ST. CLAIR SHORES	MI	48080
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte esignated Agent: Identi			
	fy by name, address (phone number – optional)		
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and ma	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	Telephone Number	
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 CITY CITY pries: List all banks or other depositories in which aintains funds.	Telephone Number	

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

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

1.						
					FEC ID number	С
2.					FEC ID number	С
3.					FEC ID number	С
4.					FEC ID number	C
-			Affiliated Committee	ee, Joint Fundra	sing Representativ	ve, or Leadership PAC Spons
DUARTE V	ICTORY F	UND 				
Mailing A	ddress	9460 TEGN	ER ROAD			
		HILMAR	<u> </u>		CA L	95324
					STATE A	ZIP CODE ▲
Relationsh	Connected	Organization by name, add	CITY ▲ Affiliated Commi		rundraising Represent	tative Leadership PAC Spo
Designated Agr	Connected ent: Identify		Affiliated Comm			tative Leadership PAC Spo
Designated Ag	Connected ent: Identify		Affiliated Comm			Leadership PAC Spo
Designated Agr	Connected ent: Identify		Affiliated Comm			Leadership PAC Spo
Designated Agr Full Name Mailing Add	ent: Identify	by name, add	Affiliated Comm		Fundraising Represent	
Designated Agr Full Name Mailing Add	Connected ent: Identify	by name, add	Affiliated Comm	er – optional)		Leadership PAC Spo

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	С
4		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
BACON VICTORY F	FUND		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA	22314
	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint Joi	int Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Joint Joi	int Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint Joi	int Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint J		
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint J	int Fundraising Representation	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint J		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or management of the content of the cont	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or make the proposition of Bank, Depository, etc.	Affiliated Committee	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

r(h). Joint Fun	draising Participant:			
1.			FEC ID numbe	er C
2.			FEC ID numbe	er C
3.			FEC ID numbe	er C
4.			FEC ID number	er C
_	ected Organization, A		undraising Representa	ntive, or Leadership PAC Sponso
Mailing Addres	PO BOX 1522	! 1		
Š				
Relationship:	LANSING	OITV A	MI	48901
neialionsnip.		CITY A	STATE	ZIP CODE ▲
Full Name	1			
a g				
				1 1
TITLE OR POS	SITION V	CITY A	STATE 4	ZIP CODE ▲
			Telephone Number	
safety deposit boxes	roadway Bank		·	osits funds, holds accounts, rents
safety deposit boxes Name of Bank, Depository, etc.	roadway Bank P.O. Box 17001		which the committee dep	
safety deposit boxes Name of Bank, Depository, etc.	roadway Bank		·	osits funds, holds accounts, rents

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

	sing Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
BECKER VICTOR	COMMITTEE		
Mailing Address	50 S JONES BLVD STE 201		
-			
	LAS VEGAS	ı ı NV ı	89107
Relationship:	CITY A	STATE A	ZIP CODE ▲
rtelationship.	CITY	SIAIE	ZIP CODE A
Designated Agent: Iden	tify by name, address (phone number - optional)		
Designated Agent: Iden	tify by name, address (phone number – optional)		
	tify by name, address (phone number – optional)		
Full Name	tify by name, address (phone number – optional)		
Full Name	tify by name, address (phone number – optional)		
Full Name L	CITY	STATE A	ZIP CODE A
Full Name	ON V	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	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	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844	1 1 1 1 1 1 1	
Relationship:	BETHESDA CITY	MD MD STATE ▲	20824 ZIP CODE ▲
	5.1.1.2		211 00012
	fy by name, address (phone number - optional)		
Full Name			
Full Name			
Mailing Address	CITY A	STATE A	ZIP CODE A
	CITY A	STATE A Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or many part of the position of	CITY ▲ ories: List all banks or other depositories in which	Telephone Number	
Mailing Address TITLE OR POSITION Fanks or Other Deposite afety deposit boxes or make the property of the pr	ories: List all banks or other depositories in which anintains funds. Third Bank P.O. Box 630900	Telephone Number	s funds, holds accounts, rent
Mailing Address TITLE OR POSITION Fanks or Other Deposite afety deposit boxes or make the property of the pr	CITY ▲ CITY ▲ Ories: List all banks or other depositories in which an aintains funds. Third Bank	Telephone Number	

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
-	l Organization, Affiliated Committee, Joint Fu	ındraising Representativ	e, or Leadership PAC Spons
CARRIER PAC			
Mailing Address	824 S MILLEDGE AVE.		
	STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X	loint Fundraising Represent	ative Leadership PAC Sp
			ative 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 – optiona		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optiona		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and ma	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in wh	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 – optiona CITY CITY Ories: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundrais	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 KIRKMEYER VICTO	d Organization, Affiliated Committee, Joint Ful DRY COMMITTEE	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVENUE		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Joint In the Affiliated Com	oint Fundraising Representa	ative Leadership PAC Spo
Connect			ative Leadership PAC Spo
Connect Designated Agent: Ident			ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name			ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name			ative Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ify by name, address (phone number – optional)		Leadership PAC Spo
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION	ify by name, address (phone number – optional)		
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION	ories: List all banks or other depositories in whi	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 not be safety deposit boxes or not be safety deposit boxes.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whith naintains funds.	STATE Telephone Number ch the committee deposit	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit rafety deposit boxes or necessarily and the connection of the connecti	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in whinaintains funds. Bank	STATE Telephone Number ch the committee deposit	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be boxes or not be boxes. M&T I depository, etc.	cify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in white naintains funds. Bank	STATE Telephone Number ch the committee deposit	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be boxes or not be boxes. M&T I depository, etc.	cify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in white naintains funds. Bank	STATE Telephone Number ch the committee deposit	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	I Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
KISTNER VICTORY	COMMITTEE		
Mailing Address	PO BOX 183		
	HUDSON	WI	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connecte Pesignated Agent: Identi	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Spo
Connecte Pesignated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	Leadership PAC Spo
Connecte Pesignated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	Leadership PAC Spo
Connecte Pesignated Agent: Identi Full Name	Affiliated Committee X Joint J	oint Fundraising Represent	Leadership PAC Spo
Connected Agent: Identification of the Connected Agent: I	Affiliated Committee X Joint J		
Connected Pesignated Agent: Identification of the Position of	Affiliated Committee X Journal of the state	STATE A Telephone Number	ZIP CODE A
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Fanks or Other Deposit afety deposit boxes or make the property of the period of Bank, Depository, etc.	Affiliated Committee X Journal of the property	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	J		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
RUDY VICTORY FU	I Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	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 control of t	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which an anintains funds. Ock Whitney Bank	STATE A Telephone Number	ZIP CODE A

0 FEC Form 1S (Revised 02/2017)

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

Page ___ **of** ____

ganization, Affiliated Committee, Joint F TORY FUND PO BOX 391 GIBSONIA CITY ganization Affiliated Committee	FEC ID number FEC ID number FEC ID number FEC ID number Undraising Representative PA STATE A Joint Fundraising Represent	15044
TORY FUND PO BOX 391 GIBSONIA CITY	FEC ID number FEC ID number undraising Representativ	re, or Leadership PAC Spons
TORY FUND PO BOX 391 GIBSONIA CITY	FEC ID number undraising Representativ	re, or Leadership PAC Spons
TORY FUND PO BOX 391 GIBSONIA CITY	undraising Representativ	re, or Leadership PAC Spons
TORY FUND PO BOX 391 GIBSONIA CITY	PA STATE A	15044
TORY FUND PO BOX 391 GIBSONIA CITY	PA STATE A	15044
PO BOX 391 GIBSONIA CITY	STATE A	ZIP CODE A
GIBSONIA CITY A	STATE A	ZIP CODE A
GIBSONIA CITY A	STATE A	ZIP CODE A
CITY A	STATE A	ZIP CODE A
CITY A	STATE A	ZIP CODE A
ganization Affiliated Committee	Joint Fundraising Represent	tative Leadership PAC Spo
name, address (phone number – optiona	l)	
		I I-I
CITY ▲	STATE ▲	ZIP CODE ▲
	Telephone Number	
ins funds. nk	hich the committee deposi	its funds, holds accounts, rents
Facilitates		
viiami Lakes		33014
	CITY A	CITY STATE Telephone Number List all banks or other depositories in which the committee depositins funds. Ink 455 Miami Lakes Drive

FEC Form 1S (Revised 02/2017)

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponso
Mailing Address	1005 CONGRESS AVENUE		
	SUITE 400		
	AUSTIN	TX	78701
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte Designated Agent: Identif	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif		int Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identif		int Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	y by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Spo
Connecte Designated Agent: Identif		int Fundraising Representa	Leadership P/
Connecte Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the composition of Bank, Depository, etc. Truist	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or make the safety deposit boxes or	y 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
Connecte Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the composition of Bank, Depository, etc. Truist	y 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

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisir	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Sponsor
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Full Name			
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
safety deposit boxes or ma	vries: List all banks or other depositories in w	Telephone Number	
Mailing Address	300 Galleria Parkway SE		
Mailing Address	Suite 100		
Mailing Address		GA J	30339 ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:			
1.		FEC	ID number	С
2.		FEC	ID number	С
3.		FEC	ID number	C
4.		FEC	ID number	С
-	Organization, Affiliated Committee, J	oint Fundraising R	epresentativ	e, or Leadership PAC Sponse
ZINKE VICTORY FU				
Mailing Address	824 S MILLEDGE AVE STE 101			
	ATHENS		GA	30605
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	Affiliated Committee Ty by name, address (phone number –	X Joint Fundraisi	ng Represent	ative Leadership PAC Spo
	_		ng Represent	ative Leadership PAC Spo
Designated Agent: Identi	_		ng Represent	ative Leadership PAC Spo
Designated Agent: Identi	_		ng Represent	ative Leadership PAC Spo
Designated Agent: Identi	_		ng Represent	ative Leadership PAC Spo
Designated Agent: Identi	by by name, address (phone number –		ng Represent	Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	by by name, address (phone number –		STATE A	
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or many part of the content of the cont	cy by name, address (phone number – compared to the compared t	optional) Telephone	STATE A Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the sa	cories: List all banks or other depositorical aintains funds. Characteristics and banks or other depositorical aintains funds.	optional) Telephone	STATE A Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:			
1.		FEC II	0 number	С
2		FEC II	0 number	С
3.		FEC II	O number	С
4.		FEC II) number	С
Name of Any Connected	Organization, Affiliated Committee, Joi	nt Fundraising Re	oresentativ	e, or Leadership PAC Spons
EDWARDS VICTOR	Y FUND			
Mailing Address	PO BOX 97275			
	RALEIGH		NC NC	27624
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connecte Designated Agent: Identi	d Organization Affiliated Committee Ty by name, address (phone number – op	X Joint Fundraising	g Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee		g Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi	d Organization Affiliated Committee		g Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee		g Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	d Organization Affiliated Committee by by name, address (phone number – op	tional)	g Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee by by name, address (phone number – op	tional)	STATE A	
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or management of the control o	d Organization Affiliated Committee by by name, address (phone number – op CITY A CITY A pries: List all banks or other depositories	tional) Telephone N	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Designated deposit boxes or make the property of the Depositor of Bank, Depository, etc.	Affiliated Committee by by name, address (phone number – op CITY CITY CITY Ational Bank 1 Monument Circle	tional) Telephone N	STATE A	ZIP CODE A

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

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

1 2						
2				FEC	ID number	C
				FEC	ID number	С
3				FEC	ID number	С
4				FEC	ID number	C
	-	_	Affiliated Committee, Join	t Fundraising F	Representativ	e, or Leadership PAC Spons
PATTIV	ICTORY FUN	ID				
Mailin	g Address	9460 TEGNE	ER ROAD			
		HILMAR			CA	95324
Relation	onship:		CITY A		STATE ▲	ZIP CODE ▲
Designated		Organization by name, addi	Affiliated Committee	X Joint Fundrais	sing Represent	tative Leadership PAC Spo
Full Nan	Agent: Identify				sing Represent	Leadership PAC Spo
	Agent: Identify				sing Represent	Leadership PAC Spo
Full Nan	Agent: Identify				sing Represent	Leadership PAC Spo
Full Nan	Agent: Identify		ress (phone number – optic			
Full Nam	Agent: Identify	by name, addi			STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
lome of Any Connected	Organization, Affiliated Committee, Joint Fund	lucioina Donyocontotiv	o ar Loodorohin DAC Spono
LAUREL LEE VICTO		Light Hepresentative	e, or Leadership FAC Spons
Mailing Address	P.O. BOX 2743		
	BRANDON	FL L	33509
	OITV A	STATE ▲	ZIP CODE ▲
	CITY ▲ Ind Organization	nt Fundraising Representa	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connected Connected Pesignated Agent: Identification	d Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Spo
Connected Agent: Identification Full Name	d Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connected Agent: Identification Full Name	d Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connected Agent: Identification Full Name	Affiliated Committee X Join by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Spo
resignated Agent: Identification Full Name Mailing Address	Affiliated Committee X Join by pame, address (phone number – optional) CITY		
resignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Fanks or Other Deposite afety deposit boxes or market.	Affiliated Committee X Join by by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected Pesignated Agent: Identification of Bank, Pepository, etc.	Affiliated Committee X Join by name, address (phone number – optional) CITY CITY CITY Dries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected , KIGGANS VICTOR	d Organization, Affiliated Committee, Joint Fun / FUND	draising Representative	e, or Leadership PAC Spon
Mailing Address	P.O. BOX 5042		
	VIRGINIA BEACH	VA VA	23471
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joint Internal Affiliated Committee X Joint Internal Affiliated Committee X Joint Internal	int Fundraising Representa	Leadership PAC Sp
		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Representation	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 anks or Other Deposit afety deposit boxes or m	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

r(h). Joint F u	ındraising Parti	cipant:				
1				FEC ID	number	С
2.				FEC ID	number	С
3				FEC ID	number	С
4.				FEC ID	number	C
_	=	ization, Affiliated C		Fundraising Rep	presentative	e, or Leadership PAC Sponso
Mailing Addı	ress 901	N WASHINGTON S	Г 			
	SU	ITE 700				
Relationship		EXANDRIA	CITY A		VA STATE ▲	22314
П	Connected Organ	ization Affiliato	d Committee	Joint Fundraising	Donrocont	ative Leadership PAC Spo
Full Name	ss I .					
TITLE OR PO		CI	TY 🛦		STATE A	ZIP CODE A
TITLE OR PO		CI	TY A	Telephone N		ZIP CODE A
Banks or Other I safety deposit box	Depositories: Lites or maintains BMO Harris	st all banks or othe funds.		Telephone N	umber	
Banks or Other I safety deposit box Name of Bank, Depository, etc.	Depositories: Lites or maintains BMO Harris	st all banks or othe funds. Bank NA		Telephone N	umber	ZIP CODE ZIP CODE s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	I Organization, Affiliated Committee, Joint Fund	aising Representative	e, or Leadership PAC Spons
AMERICAN VICTOR	RY FUND		
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA GA	30605
Dolotionobine		STATE ▲	ZIP CODE ▲
	clTY ▲ ed Organization	Fundraising Representa	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Joint		Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Joint		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint fy by name, address (phone number – optional)		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint for by name, address (phone number – optional) CITY	Fundraising Representation	
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite tafety deposit boxes or markets.	Affiliated Committee	Fundraising Representation	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Deposite Safety deposit boxes or make the property of the pr	Affiliated Committee	Fundraising Representation	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(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 Connector	l Organization, Affiliated Committee, Joint Fund	Iraisina Representative	or Leadershin PAC Spons
-	REEN VICTORY FUND		
Mailing Address	PO BOX 44211		
	INDIANAPOLIS	IN IN	46244
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fly by name, address (phone number – optional) CITY		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposition afety deposit boxes or many and man	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the prospection of Bank, Depository, etc.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connecte	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	, or Leadership PAC Sponso
	ı 228 S WASHINGTON ST		
Mailing Address	STE 115		
	ALEXANDRIA	ı VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
П	ed Organization	nt Fundraising Representa	tive Leadership PAC Spo
	ify by name, address (phone number – optional)		
Designated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)		
Full Name	ify by name, address (phone number – optional)		
Full Name	ify by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or respectively.	CITY ▲ Cories: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or respectively. Tri Control Compository, etc.	CITY ▲ CITY ▲ cories: List all banks or other depositories in which naintains funds.	Telephone Number	

FEC Form 1S (Revised 02/2017)

1.			
		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
4.			
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
PROTECT THE HOU	SE 2024		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
		STATE ▲ Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Sp
Connected Pesignated Agent: Identify			
Connected	Organization Affiliated Committee X Joint		
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Joint		
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Joint		
Pesignated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee X Joint by name, address (phone number – optional)		
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Joint by name, address (phone number – optional) CITY	Fundraising Representation	ative Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

Mailing Address	ED CURVE SOLUTIONS DNANT STREET 2ND FLOOR RLY CITY tion Affiliated Committee	F	FEC ID number IN THE INTERIOR INTE	C C C ve, or Leadership P	AC Spons
Name of Any Connected Organizat SOUTH JERSEY FIRST Mailing Address 138 CO BEVER Relationship: Connected Organizati	ED CURVE SOLUTIONS DNANT STREET 2ND FLOOR RLY CITY tion Affiliated Committee	oint Fundraisin	FEC ID number FEC ID number IN THE SECOND	C C C C C C C C C C C C C C C C C C C	AC Spons
Name of Any Connected Organizat SOUTH JERSEY FIRST Mailing Address 138 CO BEVER Relationship: Connected Organizati	ED CURVE SOLUTIONS DNANT STREET 2ND FLOOR RLY CITY tion Affiliated Committee	oint Fundraisin	Representative	C ve, or Leadership P	AC Sponse
Name of Any Connected Organizat SOUTH JERSEY FIRST Mailing Address 138 CO BEVER Relationship: Connected Organizati	ED CURVE SOLUTIONS DNANT STREET 2ND FLOOR RLY CITY tion Affiliated Committee	oint Fundraisin	ng Representativ	ve, or Leadership P	AC Sponse
Mailing Address C/O RE 138 CO BEVER Relationship: Connected Organization	ED CURVE SOLUTIONS DNANT STREET 2ND FLOOR RLY CITY tion Affiliated Committee		MA		AC Sponse
Mailing Address C/O RE 138 CO BEVER Relationship: Connected Organization	ED CURVE SOLUTIONS DNANT STREET 2ND FLOOR RLY CITY tion Affiliated Committee		MA		AC Spons
Mailing Address C/O RE 138 CO BEVER Relationship: Connected Organizati Designated Agent: Identify by name,	DNANT STREET 2ND FLOOR RLY CITY ▲ tion Affiliated Committee	X Joint Fund		01915	
Mailing Address 138 CO BEVER Connected Organizati Designated Agent: Identify by name,	DNANT STREET 2ND FLOOR RLY CITY ▲ tion Affiliated Committee	X Joint Fund		01915	
Mailing Address 138 CO BEVER Connected Organizati Designated Agent: Identify by name,	DNANT STREET 2ND FLOOR RLY CITY ▲ tion Affiliated Committee	X Joint Fund		01915	
Relationship: Connected Organizati Designated Agent: Identify by name,	CITY Affiliated Committee	X Joint Fund		01915	
Relationship: Connected Organizati Designated Agent: Identify by name,	CITY ▲ tion Affiliated Committee	X Joint Fund		01915	1_1
Connected Organization Designated Agent: Identify by name,	Affiliated Committee	X Joint Fund	STATE A		1 - 1
Connected Organization Designated Agent: Identify by name,	Affiliated Committee	X Joint Fund	01/112	ZIP C	ODE 🛦
Designated Agent: Identify by name,	_	X Joint Fund			nip PAC Spo
1					
Mailing Address					
					-
TITLE OR POSITION ▼	CITY ▲		STATE ▲	ZIP COI	DE 🛦
		Teleph	one Number		-

FEC Form 1S (Revised 02/2017)

h). Joint Fundrais i	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
BANKS VICTORY F	d Organization, Affiliated Committee, Joint Fund UND	raising Representative	e, or Leadership PAC Spons
<u> </u>			
Mailing Address	PO BOX 30844		
maining Address			
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)	STATE	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds. Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1						
2.				FEC I	D number	C
				FEC I	D number	С
3				FEC I	D number	C
4.				FEC I	D number	С
	y Connected (liated Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spons
Mailing	Address	PO BOX 1488				
		CRANBERRY T	OWNSHIP		PA	16066
_	nship:		CITY A		STATE A	ZIP CODE ▲
Relation	Connected	Organization by name, address	Affiliated Committee	S Joint Fundraisin	ng Represent	Leadership PAC Spo
Designated A	Connected Agent: Identify				ng Represent	Leadership PAC Spo
Designated <i>I</i>	Connected Agent: Identify				ng Represent	Leadership PAC Spo
Designated A	Connected Agent: Identify				ng Represent	Leadership PAC Spo
Designated A	Connected Agent: Identify		s (phone number – optio			
Designated A Full Nam Mailing A	Connected Agent: Identify	by name, address			Represent	Leadership PAC Spo

FEC Form 1S (Revised 02/2017)

			FEC	ID number	C
			FEC	ID number	С
			FEC	ID number	С
			FEC	ID number	C
Connected Or	ganization, Affil	iated Committee, Joint	Fundraising R	epresentativ	e, or Leadership PAC Spons
TORY FUND					
Address	332 W LEE HWY	, 			
	#303				
	WARRENTON		, , , , , ,	VA	20186
ship:		CITY A		STATE ▲	ZIP CODE ▲
gent: Identify b	y name, address	(phone number – optic	onal)		
	y name, address	(phone number – optic	onal)		
gent: Identify b	y name, address	(phone number – optic	onal)		
	y name, address	(phone number – optic	onal)		
	y name, address		onal)		
		city A	onal)	STATE A	ZIP CODE A
	tory fund	TORY FUND address 332 W LEE HWY #303 WARRENTON	TORY FUND address 332 W LEE HWY WARRENTON CITY CITY	TORY FUND Address	ddress #303 WARRENTON CITY STATE STATE

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

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
SMITH VICTORY	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
D. I	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Join for by name, address (phone number – optional)		
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identi			
Pesignated Agent: Identic Full Name	city by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	Telephone Number	
Pesignated Agent: Identic Full Name Mailing Address TITLE OR POSITION Mailing Address Banks or Other Deposition afety deposit boxes or mailing and mailing and mailing Address	city by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	Telephone Number	
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the sa	fy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in which aintains funds.	Telephone Number	
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the sa	fy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in which aintains funds.	Telephone Number	

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
WALBERG VICTOR			· · · · · · · · · · · · · · · · · · ·
Mailing Address	PO BOX 1362		
	JACKSON	MI	49204
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	t Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Join	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Join	at Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Join	at Fundraising Representation	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Join fy by name, address (phone number – optional)	st Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which aintains funds.	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.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
BOST VICTORY FU			· · · · · · · · · · · · · · · · · · ·
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
		STATE ▲	ZIP CODE ▲
	CITY ▲ ed Organization	int Fundraising Representa	ative Leadership PAC Spo
Connecte Cesignated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo		ative Leadership PAC Spo
Connecte Connecte Connecte Connecte Connecte Connecte	ed Organization Affiliated Committee X Jo		ative Leadership PAC Spo
Connecte Cesignated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	ed Organization Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Representa	
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Representa	
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Depositional Part of Bank, Depository, etc.	Affiliated Committee Affiliated Committee Journal fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which naintains funds. Dit Bank	state Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Agents or Other Deposite the property deposite boxes or make the property depo	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which an intains funds.	state Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Depositional Part of Bank, Depository, etc.	Affiliated Committee Affiliated Committee Journal fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which naintains funds. Dit Bank	state Telephone Number	ZIP CODE A

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

(h). Joint F		Participant:				
1					FEC ID number	С
2					FEC ID number	С
3					FEC ID number	С
4					FEC ID number	С
Name of Any C	onnected O	organization, A	Affiliated Committee, Joi	nt Fundrais	ing Representativ	e, or Leadership PAC Sponsor
KATKO VIC				1 1 1 1		
Mailing Add	dress	228 S. WASH	IINGTON STREET			
		SUITE 115				
		ALEXANDRIA	A		VA I	22314
Relationshi	ip:		CITY A		STATE A	ZIP CODE ▲
	nt: Identify I	by name, addre	ess (phone number – op	tional)		
Full Name		by name, addre	ess (phone number – op	tional)		
		by name, addre	ess (phone number – op	tional)		
Full Name		by name, addre	ess (phone number – op	tional)		
Full Name		by name, addre		tional)		
Full Name	ess		ess (phone number – op	tional)	STATE A	ZIP CODE A

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

r(h). Joint Fundraising	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 C	Organization, Affiliated Committee, Joint	Fundraising Representativ	re, or Leadership PAC Sponsor
Mailing Address	47 FLINTLOCK DRIVE		
	SHIRLEY	NY	11967
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Full Name	by name, address (phone number – option		
Mailing Address			
			1
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
		Telephone Number	
Banks or Other Depositorisafety deposit boxes or main Name of Bank, Depository, etc. Mailing Address	es: List all banks or other depositories in values funds.	vhich the committee deposi	ts funds, holds accounts, rents
	CITY A	STATE ▲	ZIP CODE ▲

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

h). Joint Fundraisi	ig Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected , HUIZENGA VICTOR	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spon
TIGIZENGA VICTOR			
Mailing Address	P.O. Box 2485		
	Springfield	VA VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Jofy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
Connecte		oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi		oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		pint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	cories: List all banks or other depositories in which 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 mame of Bank, epository, etc.	cories: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

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

			FEC I	D number	С
			FEC I	D number	С
			FEC I	D number	С
			 FEC I	D number	С
ny Connected (Organization Affil	isted Committee Joint	Fundraising Po	procentativ	o or Loadorshin DAC Spons
_	_	iated Committee, John			e, or Leadership FAC Spons
g Address	P.O. Box 701				
	Clayton			NC	27528
onship:		CITY A		STATE A	ZIP CODE ▲
Agent: Identify	by name, address	(phone number – option	nal)		
me	by name, address	(phone number – option	nal)		
	by name, address	(phone number – option	nal)		
me	by name, address	(phone number – option	nal)		
me	by name, address		nal)		770 0005 4
me		(phone number – option	nal)	STATE A	ZIP CODE A
	R CONGRESS g Address onship:	P.O. Box 701 Clayton	P.O. Box 701 Clayton Onship: CITY	ny Connected Organization, Affiliated Committee, Joint Fundraising Re	ny Connected Organization, Affiliated Committee, Joint Fundraising Representative R CONGRESSIONAL TRUST P.O. Box 701 Clayton NC STATE

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

1.					
			FEC ID	number	С
2			FEC ID	number	С
J.			FEC ID	number	С
4.			FEC ID	number	С
lame of Any Conne	ected Organization, Aff	iliated Committee, Joint	Fundraising Repr	esentative	, or Leadership PAC Spon
RODNEY DAVIS	S VICTORY FUND			1 1 1	
	D.O. D 0004				
Mailing Address	P.O. Box 9891				
	Arlington			∟ VA	22219
Relationship:		CITY A		STATE A	ZIP CODE ▲
esignated Agent: lo	dentify by name, addres	s (phone number – optior	al)		
esignated Agent: Id	dentify by name, addres	s (phone number – optior	al)	1 1 1	
	dentify by name, addres	s (phone number – optior	al)		
Full Name	dentify by name, addres	s (phone number – optior	al)		
Full Name	dentify by name, addres	s (phone number – option	al)		
Full Name L		s (phone number – option		IATE A	ZIP CODE A
Full Name					ZIP CODE A

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

1.						
_			FEC ID	number	С	
2.			FEC ID	number	С	
3.			FEC ID	number	C	
4.			FEC ID	number	С	
lame of Any Connect	ed Organization, Affiliated	Committee, Joint F	Fundraising Rep	resentative	e, or Leadership	PAC Spons
SAM GRAVES VIC	CTORY FUND					
	2345 GRAND BLVD S	SUITE 2400				
Mailing Address						
	KANSAS CITY			MO	64108	
Relationship:		CITY A		STATE ▲	ZIP	CODE A
	cted Organization Affilia		Joint Fundraising	Representa	ative Leade	rship PAC Sp
				Representa	ative Leade	rship PAC Sp
esignated Agent: Ide				Representa	ative Leade	rship PAC Sp
Pesignated Agent: Ide				Representa	Ative Leade	rship PAC Sp
esignated Agent: Ide				Representa	Ative Leade	rship PAC Sp
esignated Agent: Ide Full Name Mailing Address	ntify by name, address (pho		al)	Representa		rship PAC Sp
Pesignated Agent: Ide	ntify by name, address (pho	one number – optiona	al)	STATE A		

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

Page ___ **of** ____

1.							
				FEC ID	number	C	
2.				FEC IE	number	С	
3.				FEC IE	number	С	
4.				FEC IE	number	С	
lame of Any	/ Connected C	Organization, Affilia	ated Committee, Joint	Fundraising Rep	presentative	e, or Leadersh	ip PAC Spons
_	VICTORY F	_					
Mailing	Address	824 S. MILLEDGE	E AVENUE				
		SUITE 101					
		ATHENS	1		GA	30605	
					STATE A	71	P CODE ▲
Relation	Connected		CITY A Affiliated Committee	Joint Fundraising			
	Connected Agent: Identify		Affiliated Committee X				
esignated A	Connected Agent: Identify		Affiliated Committee X				
esignated A	Connected Agent: Identify		Affiliated Committee X				dership PAC Sp
esignated A	Connected Agent: Identify		Affiliated Committee X				
esignated A Full Name Mailing Ad	Connected Agent: Identify	by name, address	Affiliated Committee X	nal)		Lead	

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

1 2						
2. 🔟				FEC I	D number	C
				FEC I	D number	С
3.				FEC I	D number	С
4.	1 1 1 1 1			 FEC I	D number	С
Name of	Any Connected	Organization Af	filiated Committee Joint	Fundraising Re	nresentativ	e, or Leadership PAC Spons
	-	/ICTORY FUND				
Mail	ing Address	PO BOX 30844	4			
		BETHESDA		, , , , , ,	MD	20824
Rola	tionship:		CITY A		STATE ▲	ZIP CODE ▲
		d Organization	Affiliated Committee >	Soint Fundraisin	g Represent	Leadership PAC Spo
Designate Full Na	d Agent: Identify				g Represent	Leadership PAC Spo
Designate Full Na	d Agent: Identify				g Represent	Leadership PAC Spo
Designate Full Na	d Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Na	d Agent: Identify		ss (phone number – option			
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

ny Connected O			FEC ID	number number number	C C
ny Connected O	reconitation Affiliat		FEC ID	number	
ny Connected O	reconitation Affiliat				C
ny Connected O	reconstant Affiliat		FEC ID	number	
ny Connected O	rachization Affiliat		_		C
ny Connected O	rachization Affiliat				
	rganization, Allillat	ed Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spon
AHOOD					
a Address	824 S. MILLEDGE	AVENUE		1 1 1	
-	SUITE 101				
	ATHENS		1	GA	30605
onship:		CITY A		STATE A	ZIP CODE ▲
ne				1 1 1	
Address					
	<u> </u>		I	1 1	1
OR POSITION T		CITY A		STATE A	ZIP CODE ▲
	' 	1	Telephone Ni	ımber	
	Agent: Identify I	SUITE 101 ATHENS Inship: Connected Organization Af Agent: Identify by name, address (page)	SUITE 101 ATHENS Connected Organization Affiliated Committee X Agent: Identify by name, address (phone number – option ne Address CITY A CITY A CITY A	SUITE 101 ATHENS Inship: Connected Organization Affiliated Committee Agent: Identify by name, address (phone number – optional) Address CITY A CITY A	SUITE 101 ATHENS Onship: CITY A STATE A Agent: Identify by name, address (phone number – optional) Address CITY A STATE A STATE A CR POSITION STATE A

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

1.		FEC ID num	ber C
2.		FEC ID num	nber C
3.		FEC ID num	nber C
4.		FEC ID num	nber C
Name of Any Connecte	d Organization, Affiliated Committee, Joint	Fundraising Represer	ntative, or Leadership PAC Spor
Mailing Address	332 W LEE HWY		
	#303		
	WARRENTON	v	ZA 20186
Relationship:	CITY ▲	STAT	TE ▲ ZIP CODE ▲
	ed Organization Affiliated Committee	Joint Fundraising Repr	esentative Leadership PAC S
Designated Agent: Ident			Leadership PAC S
Designated Agent: Ident			Leadership PAC S
Designated Agent: Ident			Leadership PAC S
Designated Agent: Ident	ify by name, address (phone number – optio	nal)	
Designated Agent: Ident	ify by name, address (phone number – optio		
Designated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optio	nal)	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – option CITY ▲ Ories: List all banks or other depositories in naintains funds.	nal) STATE	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositions of Bank, Depository, etc.	ify by name, address (phone number – option CITY ▲ Ories: List all banks or other depositories in naintains funds.	STATE Telephone Number which the committee de	ZIP CODE A

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

1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected WILSON LEADERS	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 2456		
	SPRINGFIELD	VA VA	22152
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee X	oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional		
Designated Agent: Identi	fy by name, address (phone number – optional		Ative Leadership PAC Spo
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional CITY CITY CITY Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	city by name, address (phone number – optional states of the control of the contr	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	city by name, address (phone number – optional states of the control of the contr	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional CITY CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number ich the committee deposi	ZIP CODE A

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

1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
Name of Any Connected (Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponso
TEAM GALLAGHER			
Mailing Address	1915 SOUTH WEBSTER AVE		
3	STE D		
	GREEN BAY) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1 54301
		wi	
	CITY A	STATE ▲	ZIP CODE ▲
		int Fundraising Representa	ative Leadership PAC Spor
Connected	Organization Affiliated Committee X Jo	int Fundraising Representa	ative Leadership PAC Spor
Connected Designated Agent: Identify	Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Spor
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Spor
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Spor
Connected Designated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee X Jo by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Spor
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee X Jo by name, address (phone number – optional) CITY		

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
-	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
STRONG AMERICA	. FUND		
Mailing Address	824 S MILLEDGE AVE, STE 101		<u> </u>
			<u> </u>
	ATHENS	GA GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
Connecte		nt Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	st 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 CITY pries: List all banks or other depositories in which paintains funds.	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 pries: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
WALORSKI VICTOR	(Y FUND		
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint J	int Fundraising Representa	Leadership PAC Sp
		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Int Fundraising Representation	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 anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	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 management and ma	fy 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
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 which aintains funds.	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundrais i	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	d Organization, Affiliated Committee, Joint Fu	adraicina Poprocontativ	o or Leadership PAC Spons
PALMER VICTORY			e, or Leadership FAC Spons
Mailing Address	1919 OXMOOR ROAD		
	#223		
	HOMEWOOD	AL	35209
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joffy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident			Leadership PAC Spo
Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		Leadership PAC Spo
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in white naintains funds.	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 naintains funds.	STATE A Telephone Number	ZIP CODE A

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

	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 Fund	Iraising Representative	e, or Leadership PAC Sponso
REED VICTORY C	OMMITTEE		
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
Deletienskin	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Ident	ify by name, address (phone number - optional)		
Full Name	ify by name, address (phone number – optional)		
	ify by name, address (phone number – optional)		
Full Name	ify by name, address (phone number – optional)		
Full Name L	CITY A	STATE A	ZIP CODE A
Full Name	N ▼	STATE STATE	ZIP CODE A
Full Name Mailing Address TITLE OR POSITIO	N ▼ CITY ▲ tories: List all banks or other depositories in which naintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITIO Banks or Other Depositions of Bank, Depository, etc.	N ▼ CITY ▲ tories: List all banks or other depositories in which naintains funds.	Telephone Number	s funds, holds accounts, rents

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

			FEC	D number	С
			FEC	D number	С
			FEC	D number	C
			FEC	D number	C
Any Connected (Organization, Affil	liated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Spons
ESTES					· · · · · · · · · · · · · · · · · · ·
ng Address	P.O. BOX 26141				
	ALEXANDRIA			L ∨A	22313
tionship:		CITY A		STATE A	ZIP CODE ▲
	Organization by name, address	Affiliated Committee			ative Leadership PAC Spo
d Agent: Identify					
d Agent: Identify					
d Agent: Identify					
d Agent: Identify Ime	by name, address	s (phone number – optio			
d Agent: Identify	by name, address			STATE A	ZIP CODE A
	ESTES Ing Address ionship:	P.O. BOX 26141 ALEXANDRIA ionship:	P.O. BOX 26141 ALEXANDRIA ionship: CITY	Any Connected Organization, Affiliated Committee, Joint Fundraising Research Stres P.O. BOX 26141 ALEXANDRIA ionship: CITY	FEC ID number Any Connected Organization, Affiliated Committee, Joint Fundraising Representative ESTES P.O. BOX 26141 ALEXANDRIA VA STATE

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

(h). Joint Fundraising	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
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 Sponsor
FRIENDS OF ANDY	BARR COMMITTEE		
Mailing Address	332 W. LEE HIGHWAY		
	#303		
	WARRENTON	ı VA	20186
Relationship:	CITY A	STATE A	ZIP CODE A
		oint Fundraising Representa	
	by name, address (phone number - optional)	1	
Designated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name Mailing Address	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A

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

1.				
		FEC	ID number	С
2.		FEC	ID number	С
3.		FEC	ID number	C
4.		FEC	ID number	C
Name of Any Connected	Organization, Affiliated Committee	, Joint Fundraising F	epresentativ	e, or Leadership PAC Spons
WAST VISTORT GO				
Mailing Address	824 S MILLEDGE AVE STE 101			
	ATHENS		GA 	30605
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Full Name	1			
Mailing Address				
	CITY A		STATE A	ZIP CODE A
TITLE OR POSITION			STATE A	ZIP CODE A
1	CITY A	Telephone		ZIP CODE A
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ries: List all banks or other deposito iintains funds.		Number	s funds, holds accounts, rents
	ries: List all banks or other deposito iintains funds.	ries in which the com	Number	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	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
Name of Any Connected	I Organization, Affiliated Committee, Joint F	undraising Representativ	ve, or Leadership PAC Spons
Mailing Address	2523 WILSON BOULEVARD		
	#4		
Deletionalia	ARLINGTON	VA	22201
Relationship:	CITY A	STATE A	ZIP CODE ▲
Designated Agent: Identi	ed Organization Affiliated Committee X fy by name, address (phone number – optional	Joint Fundraising Represen	tative Leadership PAC Spo
			tative Leadership PAC Spo
Designated Agent: Identi			tative Leadership PAC Spo
Designated Agent: Identi			tative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optiona		Leadership PAC Spo
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional line) CITY ▲	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional content of the conten	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional content of the conten	STATE A Telephone Number	ZIP CODE A

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

ng Participant:				
		FEC II	0 number	C
		FEC II	0 number	С
		FEC II	0 number	C
		FEC II	0 number	C
Organization, Affili	ated Committee, Joint	Fundraising Re	oresentativ	e. or Leadership PAC Spons
JND				
PO BOX 420521				
ATLANTA			GA	30342
	CITY A		STATE A	ZIP CODE ▲
	CITY A		STATE A	ZIP CODE A
	CITY A	Telephone N		ZIP CODE A
	or other depositories in	Telephone N	ttee deposit	ZIP CODE ZIP CODE s funds, holds accounts, rents
pries: List all banks of	or other depositories in	Telephone N	ttee deposit	s funds, holds accounts, rents
-	PO BOX 420521 ATLANTA and Organization	PO BOX 420521 ATLANTA CITY Add Organization Affiliated Committee	FEC II FEC II FEC II FEC II FEC II FEC II FEC	PO BOX 420521 ATLANTA CITY STATE Add Organization Affiliated Committee X Joint Fundraising Representation

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

h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 97275		
Relationship:	RALEIGH CITY	NC NC	27624
	CHV A	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Represent	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Spo
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi	ed Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi	ed Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint fly by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Joint for by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee	STATE A elephone Number	ZIP CODE ZIP CODE ts funds, holds accounts, rents

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

h). Joint Fundraisi	ng runtoipunt.		
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 Fund	draising Representative	e, or Leadership PAC Spon
FERGUSON VICTO	RY FUND		
Mailing Address	P.O. BOX 420304		
	ATLANTA	GA	30342
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joinfy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
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 which paintains funds.	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 which paintains funds.	STATE A Telephone Number	ZIP CODE A

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

1				
2.		FE	EC ID number	C
		FE	EC ID number	С
3.		FE	EC ID number	С
4.		FE	EC ID number	С
Name of Ann Commoded On	manipation Affiliated Committee	Laint Foundation	. Downer and the	and and and in DAO Conservation
Davidson Victory Fund	ganization, Affiliated Committee	, Joint Fundraising	, nepresentative	e, or Leadership PAC Sponsor
Mailing Address	499 S. Capitol Street SW			
[Suite 407			
	Washington		DC	20003
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connected O	rganization Affiliated Committee	y Joint Funds	aising Representa	ative Leadership PAC Spon
Full Name				
Mailing Address				
l				
TITLE OR POSITION ▼	CITY ▲		STATE ▲	ZIP CODE ▲
		Telepho	ne Number	

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

1				FEC II	O number	C	
2				FEC II	O number	С	
3.				FEC II	O number	С	
4.				 FEC II	O number	С	
	_	_	iliated Committee, Joint	Fundraising Re	presentative	e, or Leadership	p PAC Spons
CRAN	MER VICTORY	-UND					
Mai	iling Address	PO BOX 26141					
		ALEXANDRIA		I	VA	22313	- -
			CITY A		STATE A	ZIF	CODE A
		Organization by name, address		Joint Fundraisin	g Representa	ative Leade	ership PAC Sp
	Connected		Affiliated Committee		g Representa	ative Leade	ership PAC Sp
esignato	Connected		Affiliated Committee		g Representa	ative Leade	ership PAC Sp
esignato	Connected ced Agent: Identify		Affiliated Committee		g Representa	ative Leade	ership PAC Sp
esignat Full N	Connected ced Agent: Identify		Affiliated Committee		g Representa	ative Leade	ership PAC Sp
esignate Full N Mailir	Connected ced Agent: Identify	by name, addres	Affiliated Committee	nal)	g Representa		ership PAC Sp

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

r(h). Joint Fundraising	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 N VICTORY FUND	Fundraising Representativ	re, or Leadership PAC Sponsor
Mailing Address	228 S. Washington Street		
	Suite 115		
	Alexandria	VA	22314
Relationship:	CITY 🛦	STATE A	ZIP CODE ▲
Full Name			
Mailing Address			
	1		I I-I
TITLE OR POSITION	CITY A	STATE A	ZIP CODE ▲
		Telephone Number	
Banks or Other Depositoring safety deposit boxes or main Name of Bank, Depository, etc. Mailing Address	ies: List all banks or other depositories in variations funds.	which the committee deposit	ts funds, holds accounts, rents

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

r(h). Joint Fundraising	y Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.	<u> </u>	FEC ID number	С
4.		FEC ID number	C
Name of Any Connected (Organization, Affiliated Committee, Joint F	undraising Representativ	e. or Leadership PAC Sponsor
JAKE ELLZEY VICTO		J	
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identify Full Name	by name, address (phone number – optiona	l)	
Mailing Address	1		
maining / tadioso			
TITLE OR POSITION	CITY ▲	STATE ▲	ZIP CODE ▲
	· 	Telephone Number	
Banks or Other Depositorisafety deposit boxes or mai Name of Bank, Depository, etc. Mailing Address	ies: List all banks or other depositories in wintains funds.	hich the committee deposi	ts funds, holds accounts, rents

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

(h). Joint Fundraisi	ig 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
Name of Any Connected	Organization, Affiliated Committ	ee, Joint Fundraisin	g Representativ	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE STE 101			
	ATHENS		GA _	30605
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Comm		raising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Comm		raising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi	d Organization Affiliated Comm		raising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Comm		raising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Commy by name, address (phone number			
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Commy by name, address (phone number		raising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Commy by name, address (phone number	er – optional)		
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Commy by name, address (phone number of the community of the community by name, address (phone number of the community of the commu	er – optional) Telepho	STATE A one Number	ZIP CODE A ts funds, holds accounts, rents
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Designation of Bank, Depository, etc.	Affiliated Commy by name, address (phone number of the community of the community by name, address (phone number of the community of the commu	er – optional) Telepho	STATE A one Number	ZIP CODE A ts funds, holds accounts, rents

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

	Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Ass. Composited (Ourse institute Affiliated Committee Laint	For ducinia and December 1	un au Landouchiu BAO On ann
GARRET GRAVES VI	Organization, Affiliated Committee, Joint CTORY FUND	rundraising Representativ	re, or Leadership PAC Sponsor
Mailing Address	PO BOX 64845		
	BATON ROUGE	LA L	70896
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	by name, address (phone number - option	nal)	
Full Name			
Mailing Address			
Mailing Address			
Mailing Address			
	CITY A	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A	STATE A Telephone Number	ZIP CODE A
	CITY A		ZIP CODE A
TITLE OR POSITION	ies: List all banks or other depositories in v	Telephone Number	
TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main	ies: List all banks or other depositories in v	Telephone Number	
TITLE OR POSITION	ies: List all banks or other depositories in v	Telephone Number	
TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	ies: List all banks or other depositories in v	Telephone Number	
TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main the safety deposit boxes or main the safety depository, etc.	ies: List all banks or other depositories in v	Telephone Number	
TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main the safety deposit boxes or main the safety depository, etc.	ies: List all banks or other depositories in v	Telephone Number	

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

	Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected (Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Sponsor
THE MILLS VICTORY	FUND		
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	ı ı VA ı	22314
Relationship:	CITY A	STATE A	ZIP CODE A
riolationionip.		oint Fundraising Representa	
Designated Agent: Identify	by name, address (phone number - optional)		
Pesignated Agent: Identify	by name, address (phone number – optional)		1 1 1 1 1 1 1 1 1 1 1
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE Telephone Number	ZIP CODE A

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

(h). Joint Fundr	aising Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
Name of Any Conne	cted Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Mailing Address	PO BOX 18502		
	HUNTSVILLE	AL	35804
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ected Organization Affiliated Committee X J)	
)	
Designated Agent: Id			
Designated Agent: Id			
Designated Agent: Id			
Designated Agent: Id	entify by name, address (phone number – optional	STATE A	ZIP CODE A
Designated Agent: Id Full Name Mailing Address	entify by name, address (phone number – optional		ZIP CODE A
Designated Agent: Id Full Name Mailing Address TITLE OR POSIT	entify by name, address (phone number – optional CITY A CITY A positories: List all banks or other depositories in whor maintains funds.	STATE A Telephone Number	ts funds, holds accounts, rents
Pesignated Agent: Id Full Name Mailing Address TITLE OR POSITE Banks or Other Deposafety deposit boxes of Name of Bank,	entify by name, address (phone number – optional CITY CITY psitories: List all banks or other depositories in whor maintains funds.	STATE Telephone Number ich the committee deposit	ts funds, holds accounts, rents
Pesignated Agent: Id Full Name Mailing Address TITLE OR POSIT Banks or Other Deposafety deposit boxes of Name of Bank, Depository, etc.	entify by name, address (phone number – optional CITY CITY psitories: List all banks or other depositories in whor maintains funds.	STATE Telephone Number ich the committee deposit	ts funds, holds accounts, rents
Pesignated Agent: Id Full Name Mailing Address TITLE OR POSIT Banks or Other Deposafety deposit boxes of Name of Bank, Depository, etc.	entify by name, address (phone number – optional CITY CITY psitories: List all banks or other depositories in whor maintains funds.	STATE Telephone Number ich the committee deposit	ts funds, holds accounts, rents

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	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	draising Representative	, or Leadership PAC Spon
MAX MILLER VICTO			
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	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	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ pries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	CITY ▲ CITY ▲ pries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rent

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	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponso
Mailing Address	13203 SE 172ND AVE		
	STE 166 #399		
	HAPPY VALLEY	OR	97086
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number - optional)		
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	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ Telegraphic Street S	elephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or management of Bank, Depository, etc.	CITY ▲ CITY ▲ Telegraphic Street S	elephone Number	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	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected MIKE FLOOD VICTO	d Organization, Affiliated Committee, Joint Fund ORY FUND	Iraising Representative	e, or Leadership PAC Spons
Mailing Address	1327 H STREET		
	STE 101		
	LINCOLN	, , NE	68508
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	ed Organization Affiliated Committee X Join fy by name, address (phone number – optional)		
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)		ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which naintains funds.	STATE A	s funds, holds accounts, rents
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 ories: List all banks or other depositories in which naintains funds.	STATE A Telephone Number	s funds, holds accounts, rents
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which naintains funds.	STATE A Telephone Number	s funds, holds accounts, rents
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which naintains funds.	STATE A Telephone Number	s funds, holds accounts, rents

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

VICTORY 2024 Mailing Address DUL Relationship: Connected Organiz	CITY A	VA STATE Joint Fundraising Repres	er C er C er C ative, or Leadership PAC Sponso
3.	O INDIAN CREEK DRIVE STE 100 LES CITY ation Affiliated Committee	FEC ID number FEC ID number FEC ID number ID n	er C er C er C ative, or Leadership PAC Sponso
Name of Any Connected Organia VICTORY 2024 Mailing Address DUL Relationship: Connected Organia Connected Organia Pull Name Mailing Address	O INDIAN CREEK DRIVE STE 100 LES CITY ation Affiliated Committee	FEC ID number undraising Representation VA STATE Joint Fundraising Representation STATE	ative, or Leadership PAC Sponso
Name of Any Connected Organia VICTORY 2024 Mailing Address L DUL Relationship: Connected Organia Connected Organia Pull Name Mailing Address	O INDIAN CREEK DRIVE STE 100 LES CITY ation Affiliated Committee	undraising Representa	20166 ZIP CODE ZIP CODE
VICTORY 2024 Mailing Address Pesignated Agent: Identify by narrow Mailing Address Mailing Address Mailing Address	O INDIAN CREEK DRIVE STE 100 LES CITY ation Affiliated Committee	VA STATE Joint Fundraising Repres	20166 ZIP CODE A
Mailing Address	CITY ation Affiliated Committee	STATE Joint Fundraising Repres	ZIP CODE A
Mailing Address DUL Relationship: Connected Organiz Designated Agent: Identify by narr Full Name Mailing Address	CITY ation Affiliated Committee	STATE Joint Fundraising Repres	ZIP CODE A
Mailing Address DUL Relationship: Connected Organiz Designated Agent: Identify by narr Full Name Mailing Address	CITY ation Affiliated Committee	STATE Joint Fundraising Repres	ZIP CODE A
Relationship: Connected Organiz Designated Agent: Identify by nar Full Name Mailing Address	CITY ▲ ation Affiliated Committee	STATE Joint Fundraising Repres	ZIP CODE A
Relationship: Connected Organiz Designated Agent: Identify by nar Full Name Mailing Address	CITY ▲ ation Affiliated Committee	STATE Joint Fundraising Repres	ZIP CODE A
Connected Organize Designated Agent: Identify by narr Full Name Mailing Address	ation Affiliated Committee X	Joint Fundraising Repres	
Designated Agent: Identify by nar Full Name Mailing Address			Leadership PAC Spo
TITLE OR POSITION ▼			
TITLE OR POSITION ▼			
TITLE OR POSITION ▼			
	CITY ▲	STATE 4	XIP CODE ▲
		Telephone Number	
Banks or Other Depositories: Lissafety deposit boxes or maintains Name of Bank, Depository, etc. Mailing Address		nich the committee depo	

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

r(h). Joint Fund	raising Participant:				
1			FEC ID	number	С
2.			FEC ID	number	С
3.			FEC ID	number	С
4.			_ FEC ID	number	C
Name of Any Conne	ected Organization, Affili	ated Committee, Joint F	undraising Rep	resentativ	e, or Leadership PAC Sponso
PROTECT THE	HOUSE NEW YORK 2	2024			
Mailing Address	PO BOX 30844				
	Litit			1 1 1	
	BETHESDA			MD	20824
Relationship:		CITY A		STATE A	ZIP CODE ▲
	nected Organization		Joint Fundraising		
	dentify by name, address	(phone number – optiona	al)		
Designated Agent: lo	dentify by name, address	(phone number – optiona	al)		
	dentify by name, address	(phone number – optiona	al)		
Full Name	dentify by name, address	(phone number – optiona	ai)		
Full Name	dentify by name, address	(phone number – optiona	al)		
Full Name		(phone number – optional		STATE A	ZIP CODE A
Full Name					ZIP CODE A

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

	draising Participant:				
1.			FEC ID	number	С
2.			FEC ID	number	C
3.			FEC ID	number	С
4.			FEC ID	number	С
			undraising Rep	resentative	e, or Leadership PAC Sponso
TEAM BRAND	ON VICTORY COM	1MITTEE 			
Mailing Addre	ss PO BOX 35	80			
	1				
	SYRACUS	<u> </u>		NY I	13220
Relationship:		CITY A		STATE A	ZIP CODE ▲
п.	onnected Organization		Joint Fundraising		
Designated Agent:	Identify by name, ad	dress (phone number – optiona	l)		
Designated Agent:	Identify by name, add	dress (phone number – optiona	I)		
		dress (phone number – optiona	i)		
Full Name		dress (phone number – optiona	i)		
Full Name		dress (phone number – optiona	i)		
Full Name		dress (phone number – optiona		STATE A	ZIP CODE A
Full Name Mailing Address					ZIP CODE A

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

1 2						
2. 🖳				FEC I	D number	C
				FEC I	D number	С
3.				FEC	D number	С
4.				FEC I	D number	С
Nama of	Amy Commonted	Ouranization Aff	illiated Committee Injus	Fundaniaina Da		o ou loodowskin DAC Coope
	-	SE CALIFORNI		Fundraising Re	epresentativ	e, or Leadership PAC Spons
Maili	ng Address	PO BOX 30844				
		BETHESDA			MD	20824
Polo	tionship:		CITY A		STATE A	ZIP CODE ▲
		1 Organization v by name, address	Affiliated Committee	≺ Joint Fundraisin	ng Represent	ative 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	d Agent: Identify		es (phone number – optio			
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

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 Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 441446		
		INDIANAPOLIS	⊥ IN I	46244
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		by name, address (phone number – optional)		
Fu	ull Name	by name, address (phone number – optional)		
Fu		by name, address (phone number – optional)		
Fu	ull Name	by name, address (phone number – optional)		
Fu	ull Name			
Fu Ma	ull Name	CITY	STATE A	ZIP CODE A
Fu Ma	ull Name	CITY A	STATE A	ZIP CODE A
Fu Manes Safety Name	ailing Address	CITY A Tele es: List all banks or other depositories in which the name of the funds.	ephone Number	s funds, holds accounts, rents

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

	Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected (Organization, Affiliated Committee, Joint Fund	draising Representative	e. or Leadership PAC Sponsor
MCCORMICK VICTO			,
Mailing Address	PO BOX 183		
	HUDSON	wi j	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identify	by name, address (phone number - optional)		
Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY	STATE A Telephone Number	ZIP CODE A
Full Name	CITY		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A	Telephone Number	
Full Name	CITY A	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor cafety deposit boxes or main Name of Bank,	CITY A	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A	Telephone Number	

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

1.	ng Participant:				
			FEC ID	number	С
2.			FEC ID	number	С
3.			FEC ID	number	С
4.			FEC ID	number	C
Name of Any Connected LANGWORTHY COL	_			resentativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 120				
	CLARENCE		I	NY	14031
Relationship:		CITY A		STATE A	ZIP CODE ▲
Full Name					
	1		1 1 1 1 1 1	1 1 1	
Mailing Address					
Mailing Address					
Mailing Address					
Mailing Address TITLE OR POSITION		CITY A		STATE A	ZIP CODE ▲
TITLE OR POSITION	■ ■ ■ ■ ■ ■ ■ ■ ■ ■	1	Telephone No		ZIP CODE A
TITLE OR POSITION	ories: List all banks or		Telephone N	umber	ZIP CODE ZIP CODE s funds, holds accounts, rents
TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m	ories: List all banks or		Telephone N	umber	
TITLE OR POSITION	ories: List all banks or	other depositories in	Telephone No	umber	
TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank,	ories: List all banks or	other depositories in	Telephone No	umber	s funds, holds accounts, rents
TITLE OR POSITION Banks or Other Deposite safety deposit boxes or manner of Bank, Depository, etc.	ories: List all banks or	other depositories in	Telephone No	umber	s funds, holds accounts, rents

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

h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Funda	aising Representativ	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 35103		
Relationship:	TUCSON CITY A	AZ STATE A	85740 ZIP CODE ▲
			_
Connecte	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Sp
Connecte		Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi 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 CITY Te	STATE A elephone Number	ZIP CODE A
esignated Agent: Identification of the composite of the c	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which naintains funds.	STATE A elephone Number	ZIP CODE A

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

	g 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	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
CHIP ROY VICTORY	FUND		
Mailing Address	6705 W. HWY 290 SUITE 50295		
	AUSTIN	TX L	78735
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected Designated Agent: Identify	Affiliated Committee X Join by name, address (phone number – optional)	nt Fundraising Representa	
Designated Agent: Identify Full Name			
Designated Agent: Identify			
Designated Agent: Identify Full Name			
Designated Agent: Identify Full Name	by name, address (phone number – optional)		
Designated Agent: Identify Full Name	by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	STATE A Telephone Number	ZIP CODE A

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

y Connected (iliated Committee, Joint	FEC ID n FEC ID n FEC ID n	number C	
		iliated Committee, Joint	FEC ID r	umber C	
		iliated Committee, Joint	FEC ID n		
		iliated Committee, Joint		umber C	
		iliated Committee, Joint	For dealer 5		
		•	Fundraising Repre	sentative, or	Leadership PAC Spons
Address	1600 WEST LC	OOP S STE 620			
	HOUSTON			TX	77027
nship:		CITY A	8	TATE A	ZIP CODE ▲
e					
ddress					
		CITY			7IP CODE A
R POSITION	*	CITY A	ST	ATE .	ZIP CODE A
_	Connected	HOUSTON HOUSTON Aship: Connected Organization Agent: Identify by name, address	HOUSTON Affiliated Committee Agent: Identify by name, address (phone number – option	HOUSTON Iship: CITY Connected Organization Affiliated Committee Joint Fundraising R Agent: Identify by name, address (phone number – optional)	HOUSTON STATE A Connected Organization Affiliated Committee X Joint Fundraising Representative Agent: Identify by name, address (phone number – optional)

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	С
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 1575		
Relationship:	ROSWELL CITY	GA STATE ▲	30077 ZIP CODE ▲
	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sport
esignated Agent: Identi 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 CITY Telepories: List all banks or other depositories in which	STATE A elephone Number the committee deposit	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which naintains funds.	STATE A elephone Number the committee deposit	ZIP CODE ZIP CODE ss funds, holds accounts, rents

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

1. L 2.		g Participant:				
2.				FEC II	0 number	С
				FEC II	0 number	С
3				FEC II	0 number	С
4				FEC II	0 number	С
	_	_	filiated Committee, Joint	Fundraising Rep	presentative	e, or Leadership PAC Spor
AARC	ON BEAN TEAM					
Ма	iling Address	2640-A MITCH	IAM DRIVE			
						1 1 1 1 1 1 1 1
		TALLAHASSE	E	, , , , , ,	FL	32308
Re	lationship:		CITY A		STATE A	ZIP CODE ▲
Full 1	Name					
Mailir	ng Address					
		1				
TITL	.E OR POSITION	\	CITY A		STATE A	ZIP CODE A

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

1		Participant:				
				FEC II	O number	C
2				FEC II	O number	C
3.				FEC II	O number	C
4.				FEC II	O number	C
						
lame of	Any Connected (Organization, Affi	liated Committee, Joint	Fundraising Re	presentative	e, or Leadership PAC Spons
LALO	TA VICTORY FU	JND 				<u> </u>
Ма	iling Address	PO BOX 183				
		HUDSON		1	WI	54016
Re	lationship:		CITY A		STATE A	ZIP CODE ▲
Full N	Name					1 1 1 1 1 1 1 1 1
	ng Address	1				
Mailir	ig Addicos					
Mailir	ig Address					
Mailir	ig Addiess					
	LE OR POSITION	-	CITY A		STATE A	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
lame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
TEAM OGLES			
Mailing Address	P.O. BOX 183		
	HUDSON	WI	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X J		ative Leadership PAC Spo
Connected Agent: Identif	d Organization Affiliated Committee X J		ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee X J		ative Leadership PAC Spo
Connected Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee X J y by name, address (phone number – optional)		ative Leadership PAC Spo
Connecte Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	d Organization Affiliated Committee X J y by name, address (phone number – optional)		
Connected Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Connected Pesignated Agent: Identification of Bank, Depository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A

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

r(h). Joint Fundraisin	g Participant:				
1			FEC I	D number	C
2			FEC I	D number	C
3.	<u> </u>		FEC I	D number	C
4.			 FEC I	D number	C
Name of Any Connected	Organization, Affilia	ted Committee, Joint	Fundraising Re	presentative	e, or Leadership PAC Sponsor
AMERICAN BATTLE	GROUND FUND				
Mailing Address	PO BOX 30844				
	BETHESDA			MD	20824
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connected	I Organization A	ffiliated Committee	Joint Fundraisin	g Representa	ative Leadership PAC Spons
Full Name					
Mailing Address					
	1				
TITLE OR POSITION	\	CITY A		STATE A	ZIP CODE A
TITLE OR POSITION	▼	CITY A	Telephone N		ZIP CODE A

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
_	Organization, Affiliated Committee, Joint Fundamental Fundament	draising Representative	e, or Leadership PAC Spons
SCALISE LEADERS	SHIP FUND 2024		
Mailing Address	320 1ST ST SE		<u> </u>
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint J	nt Fundraising Representa	auve Leadership PAC Sp
		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Spi
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Spi
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Spi
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	ZIP CODE A
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which paintains 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 which paintains 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which paintains 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 mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A

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

	ing 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 Representative	e, or Leadership PAC Sponsor
EMMER MAJORIT	Y BUILDERS		
Mailing Address	824 S. MILLEDGE AVE. STE. 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ted Organization Affiliated Committee X J		
	tify by name, address (phone number – optional)		
Designated Agent: Iden			
Designated Agent: Iden			
Designated Agent: Iden			
Designated Agent: Iden Full Name Mailing Address	tify by name, address (phone number – optional)		ZIP CODE A
Designated Agent: Iden	tify by name, address (phone number – optional)		ZIP CODE A

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

	g Participant:				
1.			FEC I	D number	С
2.	<u> </u>		FEC I	D number	C
3.			FEC I	D number	С
4.			FEC I	D number	C
Name of Any Connected	Organization, Affiliated	d Committee, Joint F	undraising Re	presentativo	e, or Leadership PAC Sponsor
GROW THE MAJORI	TY				
Mailing Address	228 S. Washington S	ireet			
	Suite 115				
	Alexandria			VA	22314
Relationship:		CITY A		STATE A	ZIP CODE ▲
П.	I Organization Affili	ated Committee	Joint Fundraisin		ative Leadership PAC Spons
Full Name					
Mailing Address					
TITLE OR POSITION	-	CITY A		STATE A	ZIP CODE A
TITLE OR POSITION	V	CITY A	Telephone N		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
TEAM FRY	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	fy by name, address (phone number – optional)	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	fy by name, address (phone number – optional)		Ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: 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 mane of Bank,	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 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 CITY pries: 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 CITY pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent

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

h). Joint Fundrais i	•		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
MORAN VICTORY	FUND		
Mailing Address	PO BOX 30844		
J			
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Representa	Leadership PAC Sp
	Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Ident 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
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or necessity.	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: Ident Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A

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

r(h). Joint Fundraisin	g Participant:		
1		FEC ID num	ber C
2	<u> </u>	FEC ID num	ber C
3.		FEC ID num	ber C
4.		FEC ID num	ber C
Name of Any Connected	Organization, Affiliated Committee, Join	nt Fundraising Represer	ntative, or Leadership PAC Sponso
MARIO DIAZ-BALAR	T VICTORY FUND		
Mailing Address	2308 MOUNT VERNON AVE		
	SUITE 337		
	ALEXANDRIA	, V	A 22301 1
Relationship:	CITY A	STAT	□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
		X Joint Fundraising Repr	
Full Name			
Mailing Address			
TITLE OR POSITION	CITY A	STATE	ZIP CODE A
TITLE OR POSITION	CITY A	STATE Telephone Number	

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected FINSTAD VICTORY	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spon
I INSTAB VICTORT			
Mailing Address	P.O. BOX 183		
	HUDSON	WI WI	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee X Jo	pint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Jo	pint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	sint Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Joy by name, address (phone number – optional)		
connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Journal of the state	STATE A Telephone Number	ZIP CODE A
Connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee 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

(h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	С
_	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
WAGNER-MCHENR	Y VICTORY		
Mailing Address	6269 LEESBURG PIKE		
	B7		
	FALLS CHURCH	VA	22044
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	od Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi	od Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	od Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Jo		
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY		
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo fy 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
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	Affiliated Committee X Jo fy 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

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

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 Fun	draising Representative	e, or Leadership PAC Sponsor
MACE MAJORITY FU	ND		
Mailing Address	824 S MILLEDGE AVE		
	STE. 101		
	ATHENS	ı GA ı	30605
Relationship:	CITY ▲	STATE A	ZIP CODE A
riolationomp.			
	Organization Affiliated Committee X Joi by name, address (phone number – optional)	int Fundraising Representa	Leadership PAC Spor
		int Fundraising Representa	Leadersnip PAC Spon
Designated Agent: Identify		int Fundraising Representa	Leadersnip PAC Spor
Pesignated Agent: Identify		int Fundraising Representa	Leadersnip PAC Spon
Pesignated Agent: Identify		int Fundraising Representa	Leadersnip PAC Spor
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	int Fundraising Representa	ZIP CODE A
Pesignated Agent: Identify	by name, address (phone number – optional)		

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

1.							
				FEC I	D number	C	
2. 🔟				FEC I	D number	С	
3.				FEC I	D number	С	
4.				 FEC I	D number	С	
		2	"" - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	E delicio D			DAG 0
	Y VICTORY FU		iliated Committee, Joint	- Lundraising Re		e, or Leadersni	PAC Spons
Maili	ng Address	824 S MILLEDO	GE AVE				
		STE 101					
		ATHENS		, , , , , ,	GA	30605	- -
Polo	tionship:		CITY A		STATE A	ZIF	CODE A
	Connected	Organization by name, addres	Affiliated Committee >	Joint Fundraisin	g Representa	ative Leade	ership PAC Sp
	Connected d Agent: Identify				g Representa	ative Leade	ership PAC Sp
e signate Full Na	Connected d Agent: Identify				g Representa	ative Leade	ership PAC Spo
Designate	Connected d Agent: Identify				g Representa	ative Leade	ership PAC Spo
e signate Full Na	Connected d Agent: Identify				g Representa	ative Leade	ership PAC Spo
resignate Full Na Mailing	Connected d Agent: Identify	by name, addres			g Representa		ership PAC Spo

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
GRANGER VICTOR	I Organization, Affiliated Committee, Joint Fun Y COMMITTEE	draising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 9891		
	ARLINGTON		22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connections and Connections are connected as a connection of the c	ed Organization Affiliated Committee X Jo		
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	Telephone Number	s 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,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rent

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

				ID number	C
			FEC		
				ID number	С
			FEC	ID number	С
			FEC	ID number	С
y Connected (Organization, Aff	iliated Committee, Joi	nt Fundraising R	epresentative	e, or Leadership PAC Spons
ARCIA VICTO	RY FUND				
g Address	9070 IRVINE C	ENTER DRIVE #150			
	IRVINE			CA	92618
onship:		CITY ▲		STATE ▲	ZIP CODE ▲
	by Harrio, address				
ne	J				
ne					
					7ID 0005
		CITY A		STATE A	ZIP CODE A
	ARCIA VICTO Address nship: Connected	ARCIA VICTORY FUND 9070 IRVINE C IRVINE IRVINE Connected Organization	ARCIA VICTORY FUND 9070 IRVINE CENTER DRIVE #150 IRVINE IRVINE Connected Organization Affiliated Committee	ARCIA VICTORY FUND Address 9070 IRVINE CENTER DRIVE #150 IRVINE IRVINE CITY	Address 9070 IRVINE CENTER DRIVE #150 IRVINE CA STATE Connected Organization Affiliated Committee X Joint Fundraising Represent

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	С
Name of Any Connected	Organization, Affiliated Committee, Joi	nt Fundraising Rep	esentative	or Leadership PAC Spons
JERRY CARL VICTO	_			
Mailing Address	PO BOX 852138			
	MOBILE		AL	36685
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	d Organization Affiliated Committee y by name, address (phone number – op	X Joint Fundraising	Representa	titive Leadership PAC Spo
Designated Agent: Identi	_		Representa	tive Leadership PAC Spo
Designated Agent: Identi	_		Representa	Leadership PAC Spo
Designated Agent: Identi	_		Representa	Leadership PAC Spc
Designated Agent: Identing Full Name Mailing Address	y by name, address (phone number – op	tional)	Representa	ZIP CODE A
Designated Agent: Identi	y by name, address (phone number – op	tional)	TATE A	
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – op CITY CITY pries: List all banks or other depositories aintains funds.	tional) S Telephone Nu	TATE mber ee deposits	ZIP CODE A
Pesignated Agent: Identification Full Name	y by name, address (phone number – op CITY CITY pries: List all banks or other depositories aintains funds.	tional) S Telephone Nu in which the committe	TATE mber ee deposits	ZIP CODE A

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

	John Fundraising	Participant:			
1.			FEC II	O number	С
2			FEC II	O number	C
3			FEC II	O number	C
4.			FEC II	O number	С
- Nama a	Characteria (A CONTRACT A CONTRACT OF THE C	E or decision De		Landard La RAO Onomon
	-	Organization, Affiliated Committee, Jo FUNDRAISING COMMITTEE	int Fundraising He	presentative	e, or Leadership PAC Sponsor
	WI WIGORE GOILL				
Ma	ailing Address	370 EAST SOUTH TEMPLE STE 580			
		SALT LAKE CITY		UT	84111
Re	elationship:	CITY A		STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	X Joint Fundraisin	g Representa	tive Leadership PAC Sponsor
3. Designa	ted Agent: Identify	by name, address (phone number - op	otional)		
	ted Agent: Identify	by name, address (phone number – op	otional)		
Full		by name, address (phone number – op	otional)		
Full	Name	by name, address (phone number – op	otional)		
Full	Name	by name, address (phone number – op	otional)		
Full Maili	Name	CITY A	otional)	STATE A	7IP CODE A
Full Maili	Name	CITY A		STATE A	ZIP CODE A
Full Maili	Name	CITY A	otional) Telephone N		ZIP CODE A
Full Maili TITI	Name	CITY	Telephone N	lumber	
Full Maili TITI	Name	CITY A es: List all banks or other depositories	Telephone N	lumber	
Full Maili TITI Banks of safety de	ng Address LE OR POSITION or Other Depositori eposit boxes or main	CITY A es: List all banks or other depositories	Telephone N	lumber	
Full Maili TITI	ng Address LE OR POSITION or Other Depositori eposit boxes or main	CITY A es: List all banks or other depositories	Telephone N	lumber	
Full Maili TITI Banks of safety de Name of Deposito	ng Address LE OR POSITION or Other Depositori eposit boxes or main	CITY A es: List all banks or other depositories	Telephone N	lumber	
Full Maili TITI D. Banks of safety de Name of Deposito	ng Address LE OR POSITION or Other Depositori eposit boxes or main Bank, ry, etc.	CITY A es: List all banks or other depositories	Telephone N	lumber	
Full Maili TITI D. Banks of safety de Name of Deposito	ng Address LE OR POSITION or Other Depositori eposit boxes or main Bank, ry, etc.	CITY A es: List all banks or other depositories	Telephone N	lumber	

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

	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
PFLUGER VICTORY	Organization, Affiliated Committee, Joint F FUND	undraising Representat	ive, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
		<u> </u>	
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE A	▲ ZIP CODE ▲
Connecte Designated Agent: Identif	d Organization Affiliated Committee X y by name, address (phone number – optiona	Joint Fundraising Represe	That is a second of the second
Designated Agent: Identif			ntative Leadership PAC Spo
Designated Agent: Identif			La Education p 17 to op.
Designated Agent: Identif			
Designated Agent: Identif	y by name, address (phone number – optional	al)	
Designated Agent: Identif	y by name, address (phone number – optional		ZIP CODE A
Pesignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional	al)	
Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional control of the control	STATE A Telephone Number	ZIP CODE A sits funds, holds accounts, rents
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 control of the control	STATE Telephone Number hich the committee depo	ZIP CODE A sits funds, holds accounts, rents
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 control of the control	STATE A Telephone Number	ZIP CODE A sits funds, holds accounts, rents

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

5(g) c	or(h). Joint Fundraisi r	ng Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representativ	re, or Leadership PAC Sponsor
	NEHLS VICTORY			
	Mailing Address	1612 CRABB RIVER RD		
		RICHMOND	TX	77469
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee	Joint Fundraising Represent	tative Leadership PAC Sponsor
8.	Designated Agent: Identif	y by name, address (phone number – optiona	u) 	
	Mailing Address			
	TITLE OR POSITION	CITY ▲	STATE ▲	ZIP CODE ▲
			Telephone Number	
9.	Banks or Other Depositor safety deposit boxes or more Name of Bank, Depository, etc.		hich the committee deposi	
	Mailing Address	1		
	manning / www.coc			
	Ü			

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	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint F	undraising Representativ	ve. or Leadership PAC Spons
TEAM RONNY			· · ·
Mailing Address	PO BOX 51522		
	AMARILLO		79159
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte		Joint Fundraising Represen	tative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X		tative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X		tative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X		tative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X		tative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X fy by name, address (phone number – options		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X fy by name, address (phone number – options	al)	
Connecte signated Agent: Identi Full Name Mailing Address TITLE OR POSITION nks or Other Deposite ety deposit boxes or mane of Bank,	Affiliated Committee Affiliated Committee X Y CITY CITY Pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee Affiliated Committee X Y CITY CITY Pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number thich the committee depos	ZIP CODE A

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

(h). Joint Fundrais	ng Participant:		
1.		FEC ID num	ber C
2.		FEC ID num	ber C
3.		FEC ID num	ber C
4.		FEC ID num	ber C
Name of Any Connected	d Organization, Affiliated Committee, Joint	Fundraising Represen	tative, or Leadership PAC Spons
TONT GONZALES			
Mailing Address	12000 STARCREST DR		
	STE 101		
	SAN ANTONIO		X 78247
Relationship:	CITY ▲	STAT	TE ▲ ZIP CODE ▲
	ed Organization Affiliated Committee	X Joint Fundraising Repre	esentative Leadership PAC Spo
			esentative Leadership PAC Spo
Designated Agent: Ident			esentative Leadership PAC Spo
Designated Agent: Ident			esentative Leadership PAC Spo
Designated Agent: Ident	fy by name, address (phone number – optic	onal)	
Designated Agent: Ident	fy by name, address (phone number – optic		
Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optic	onal)	ZIP CODE A
Designated Agent: Ident Full Name	fy by name, address (phone number – optic	STATE Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposites afety deposit boxes or not be safety deposit boxes or not be safety. Depository, etc.	fy by name, address (phone number – optic	STATE Telephone Number which the committee de	ZIP CODE A

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

(h). Joint Fundraisi	ig i ai tioipaiit.			
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, Join	t Fundraising Repi	esentative	e, or Leadership PAC Spons
Mailing Address	PO BOX 365			
	MCLEAN		_ VA 	22101
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	d Organization Affiliated Committee y by name, address (phone number – option	X Joint Fundraising onal)	Representa	ative Leadership PAC Spo
Designated Agent: Identif			Representa	ative Leadership PAC Spo
Designated Agent: Identif			Representa	Leadership PAC Spo
Designated Agent: Identif			Representa	Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – option	onal)		
Designated Agent: Identif	y by name, address (phone number – option	onal)	Representa	Leadership PAC Spo
Pesignated Agent: Identification Full Name Mailing Address	y by name, address (phone number – option	onal)	TATE A	
Full Name Mailing Address TITLE OR POSITION Inks or Other Deposite fety deposit boxes or mane of Bank,	y by name, address (phone number – option of the control of the co	onal) S Telephone Nu	TATE mber ee deposit	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the period of Bank, Depository, etc	y by name, address (phone number – option of the control of the co	Telephone Nu	TATE mber ee deposit	ZIP CODE A

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

1.	Participant:			
		FEC ID nur	mber C	
2.		FEC ID nur	mber C	
3.		FEC ID nur	mber C	
4.		FEC ID nur	mber C	
Name of Any Connected C	organization, Affiliated Committee, Joi	nt Fundraising Represe	ntative, or	Leadership PAC Sponsor
ISSA VICTORY FUND				
Mailing Address	9070 IRVINE CENTER DRIVE			
	SUITE 150			
	IRVINE		CA	92618
Relationship:	CITY A	ST/	J L ATE ▲	ZIP CODE ▲
	Organization Affiliated Committee	X Joint Fundraising Rep		Leadership PAC Sponse
Full Name				
Mailing Address				
TITLE OF POSITION -	CITY A	STAT	E 🛦	ZIP CODE ▲
TITLE OR POSITION V				
TITLE OR POSITION •		Telephone Numbe	er 🗀 🖂	

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

ganization, Affiliated Committee IND 75 S HIGH ST STE. 4 DUBLIN rganization Affiliated Committee r name, address (phone number	ittee X Joint	FEC ID number FEC ID number FEC ID number FEC ID number Aising Representation OH STATE Fundraising Represe	r C r C tive, or Leader	zship PAC Spons ZIP CODE eadership PAC Spo
75 S HIGH ST STE. 4 DUBLIN rganization Affiliated Comm	ittee X Joint	FEC ID number FEC ID number aising Representation OH STATE	r C tive, or Leader	ZIP CODE A
75 S HIGH ST STE. 4 DUBLIN rganization Affiliated Comm	ittee X Joint	FEC ID number	tive, or Leader	ZIP CODE A
75 S HIGH ST STE. 4 DUBLIN rganization Affiliated Comm	ittee X Joint	aising Representa	tive, or Leader	ZIP CODE A
75 S HIGH ST STE. 4 DUBLIN rganization Affiliated Comm	ittee X Joint	OH	43017	ZIP CODE A
75 S HIGH ST STE. 4 DUBLIN rganization Affiliated Comm	ittee X Joint	OH	43017	ZIP CODE A
75 S HIGH ST STE. 4 DUBLIN CITY rganization Affiliated Comm		STATE	<u> </u>	
STE. 4 DUBLIN CITY rganization Affiliated Comm		STATE	<u> </u>	
STE. 4 DUBLIN CITY rganization Affiliated Comm		STATE	<u> </u>	
STE. 4 DUBLIN CITY rganization Affiliated Comm		STATE	<u> </u>	
DUBLIN CITY rganization Affiliated Comm		STATE	<u> </u>	
CITY ▲ rganization Affiliated Comm		STATE	<u> </u>	
rganization Affiliated Comm				
_		Fundraising Represe	entative L	eadership PAC Spo
				-
CITY A		STATE A	. 2	ZIP CODE A
	ı Tel	lephone Number	-	- -
	s: List all banks or other depos ains funds.	s: List all banks or other depositories in which tains funds.	Telephone Number S: List all banks or other depositories in which the committee deposits funds.	Telephone Number =

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

5(g) or (h). Joint Fundraising	ı Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6. N	-	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
	WOMACK MAJORITY	FUND 		
	Mailing Address	228 S WASHINGTON ST STE 115		
		ALEXANDRIA	VA VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
8. D	esignated Agent: Identify Full Name	by name, address (phone number - optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tel	lephone Number	
sa N	anks or Other Depositorialety deposit boxes or mainame of Bank, epository, etc.		the committee deposit	
	Mailing Address			
	3			

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

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2			FEC ID number	С
3	. <u> </u>		FEC ID number	C
4.			FEC ID number	C
	e of Any Connected (Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
	D. 1.1.	BETHESDA	MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		by name, address (phone number - optional)		
	Full Name			
	Full Name			
Ν		CITY A	STATE A	ZIP CODE A
Ν	Mailing Address	Y	STATE A	ZIP CODE A
9. Bank safety	Mailing Address TITLE OR POSITION	es: List all banks or other depositories in which ntains funds.	elephone Number	s funds, holds accounts, rents

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

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
	of Any Connected C	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
L BK	ADT VICTORT FOI	\D		
	Mailing Address	8505 TECHNOLOGY FOREST PLACE		
		SUITE 702		
		THE WOODLANDS	TX	77381
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	ative Leadership PAC Sponsor
8. Desig	nated Agent: Identify	by name, address (phone number - optional)		
Fu	ıll Name			
Ma	ailing Address			
Т	TILE OR POSITION •	CITY A	STATE ▲	ZIP CODE ▲
L		1	phone Number	
	or Other Depositori deposit boxes or mair	es: List all banks or other depositories in which th	e committee deposit	s funds, holds accounts, rents
	of Bank,			
	Mailing Address			
		1	1 1 1	

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

1.		Participant:		
STATE △ ZIP CODE △ TITLE OR POSITION ▼ STATE △ ZIP CODE △ FEC ID number C FEC ID numbe	1.		FEC ID number	er C
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor TEAM MCHENRY Mailing Address 228 S. WASHINGTON STREET SUITE 115 ALEXANDRIA Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲ ZIP CODE ▲	2.		FEC ID number	er C
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor TEAM MCHENRY Mailing Address 228 S. WASHINGTON STREET SUITE 115 ALEXANDRIA ALEXANDRIA Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	3.		FEC ID number	er C
TEAM MCHENRY Mailing Address 228 S. WASHINGTON STREET SUITE 115 ALEXANDRIA Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	4		FEC ID number	er C
TEAM MCHENRY Mailing Address 228 S. WASHINGTON STREET SUITE 115 ALEXANDRIA Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	Name of Any Connected (Organization Affiliated Committee Joint	Fundraising Represents	itive or Leadership PAC Sponso
Mailing Address SUITE 115 ALEXANDRIA ALEXANDRIA CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲ ZIP CODE ▲		- 		,
Mailing Address SUITE 115 ALEXANDRIA ALEXANDRIA CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲ ZIP CODE ▲				
Mailing Address SUITE 115 ALEXANDRIA ALEXANDRIA CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲ ZIP CODE ▲				
ALEXANDRIA Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	Mailing Address	228 S. WASHINGTON STREET		
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲		SUITE 115		
Connected Organization		ALEXANDRIA	, VA	22314
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲	Relationship:	CITY A	STATE	ZIP CODE ▲
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲	Connected	Organization Affiliated Committee	Joint Fundraising Repres	antativa Leadership PAC Spor
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	Full Name			
TITLE OR POSITION ▼	Full Name			
TITLE OR POSITION ▼				
TITLE OR POSITION ▼				
	Mailing Address	CITY A	STATE A	ZIP CODE A
	Mailing Address	CITY A		ZIP CODE A
	Mailing Address TITLE OR POSITION Banks or Other Depositor	ies: List all banks or other depositories in v	Telephone Number	
	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	ies: List all banks or other depositories in v	Telephone Number	
Name of Bank, Depository, etc.	Mailing Address TITLE OR POSITION Banks or Other Depositor cafety deposit boxes or main and the second se	ies: List all banks or other depositories in	Telephone Number	
Name of Bank,	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail warme of Bank, Depository, etc.	ies: List all banks or other depositories in	Telephone Number	
Name of Bank, Depository, etc.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail warme of Bank, Depository, etc.	ies: List all banks or other depositories in	Telephone Number	
Name of Bank, Depository, etc.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail warme of Bank, Depository, etc.	ies: List all banks or other depositories in	Telephone Number	

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

(h). Joint Fundraisi	ng Participant:		
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	Organization, Affiliated Committee, Joint	Fundraising Represent	ative, or Leadership PAC Spons
NUNES VICTORY F	UND		
Mailing Address	PO BOX 6545		
	VISALIA	CA	93290
Relationship:	CITY A	STATE	ZIP CODE ▲
	d Organization Affiliated Committee	Joint Fundraising Representation	sentative Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi	y by name, address (phone number – optio	nal)	
Designated Agent: Identi	y by name, address (phone number – optio		
Designated Agent: Identi Full Name Mailing Address	y by name, address (phone number – optio	nal)	
Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optio	nal) STATE Telephone Number	ZIP CODE A Dosits funds, holds accounts, rents
Pesignated Agent: Identi 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 – optio	STATE Telephone Number which the committee dep	ZIP CODE A Dosits funds, holds accounts, rents

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

	Y COMMIT	TEE		Joint Fund	FEC FEC	ID number ID number ID number ID number ID number	C C C e, or Lead	dership PAC S	Sponso
victor'	Y COMMIT	TEE		Joint Fund	FEC	ID number	C	dership PAC S	Sponso
victor'	Y COMMIT	TEE		Joint Fund	FEC	ID number	С	dership PAC \$	Sponso
victor'	Y COMMIT	TEE		Joint Fund				dership PAC \$	Sponso
victor'	Y COMMIT	TEE		Joint Fund	draising R	epresentativ	e, or Lead	dership PAC \$	Sponso
o:		RIA	TREET #115						
o:		RIA	TREET #115						
	ALEXAND								
	ALEXAND		1 1 1 1						
						VA	2231	14	
Connected ((CITY A			STATE A		ZIP CODE	A
SS									
	<u> </u>	1 1 1 1	1 1 1 1	1 1 1		1 . 1	1		1 1
OSITION T	,	CI	TY 🛦			STATE ▲		ZIP CODE	<u> </u>
				_	Telephone	Number _			
	POSITION ▼	ess L	POSITION ▼ CI Depositories: List all banks or other	POSITION ▼ CITY ▲ Depositories: List all banks or other depositoric	CITY ▲ CITY ▲ Depositories: List all banks or other depositories in which	POSITION ▼ CITY ▲ Telephone Depositories: List all banks or other depositories in which the comm	POSITION ▼ CITY ▲ STATE ▲ Telephone Number Depositories: List all banks or other depositories in which the committee deposit	POSITION ▼ CITY ▲ STATE ▲ Telephone Number — Depositories: List all banks or other depositories in which the committee deposits funds, h	POSITION CITY STATE ZIP CODE Telephone Number Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts

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

1.			
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representat	ive, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY 🛦	STATE .	▲ ZIP CODE ▲
3	ή,	,	
Full Name	1	,	
		, 	
Full Name			
Full Name			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name			fy by name, address (phone number – optional)
POSITION r Deposito	CITY A	STATE A Telephone Number	
ull Name Iailing Address TITLE OR POSITION s or Other Depositor deposit boxes or make of Bank,	CITY A ries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	sits funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor detay deposit boxes or material deposit boxes or material depository, etc.	CITY A ries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	sits funds, holds accounts, rents

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

PORY COMMITMENT OF THE PROPERTY OF THE PROPERT	WASHINGTON S	T STE 115	Joint Fund	FEC II	O number O number O number O number O number Presentativ	C C C C C C C C C C C C C C C C C C C		: Sponso
PORY COMMITMENT OF THE PROPERTY OF THE PROPERT	WASHINGTON S	T STE 115	Joint Fund	FEC II	D number D number presentativ	C C e, or Lead		Sponso
PORY COMMITMENT OF THE PROPERTY OF THE PROPERT	WASHINGTON S	T STE 115	Joint Fund	FEC II	presentativ	e, or Lead		: Sponso
PORY COMMITMENT OF THE PROPERTY OF THE PROPERT	WASHINGTON S	T STE 115	Joint Fund		presentativ	e, or Lead		Sponso
PORY COMMITMENT OF THE PROPERTY OF THE PROPERT	WASHINGTON S	T STE 115	Joint Fund	raising Re				Sponso
ess 228 S ALEX	WASHINGTON S	CITY A			VA VA	223	14	
ALEX	ANDRIA	CITY A			VA	223	14	
ALEX	ANDRIA	CITY A			VA	223	14	
connected Organiza					L VA	223	14	
connected Organiza					L VA ⊥	223	14 .	
onnected Organiza							_	
	ation Affiliate				STATE A		ZIP COE	DE 🛦
. Identity by Ham	e, address (phone	e number – o	optional)	1 1 1	1 1 1 1		1 1 1 1	1 1 1
s I i i								
					1 1			
ASITION W	Cl	ITY 🛦			STATE A		ZIP CODE	
J.			т	elephone N	lumber _			
	Depositories: List es or maintains fu	DSITION V	DSITION ▼ CITY ▲ Depositories: List all banks or other depositories	OSITION ▼ CITY ▲ Depositories: List all banks or other depositories in which	CITY ▲ CITY ▲ Depositories: List all banks or other depositories in which the committee in the committee	OSITION ▼ CITY ▲ STATE ▲ Telephone Number Depositories: List all banks or other depositories in which the committee deposit	CITY ▲ STATE ▲ CITY ▲ Telephone Number — Depositories: List all banks or other depositories in which the committee deposits funds, h	CITY ▲ STATE ▲ ZIP CODE Telephone Number — — — Depositories: List all banks or other depositories in which the committee deposits funds, holds account

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

r(h). Joint Fundraising	Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected C	Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Sponsor
SCHWEIKERT VICTO	RY COMMITTEE	<u> </u>	
Mailing Address	228 S WASHINGTON STREET STE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	by name, address (phone number – optiona	ս) 	
Mailing Address			
			1
TITLE OR POSITION A	_ CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	,	Telephone Number	
Banks or Other Depositori safety deposit boxes or mair	es: List all banks or other depositories in w		ts funds, holds accounts, rents
Name of Bank, Depository, etc.			
	I		
Mailing Address			
	CITY ▲	STATE A	ZIP CODE ▲

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

r(h). Joint Fundraisin	g 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 Fun	draising Representative	e, or Leadership PAC Sponsor
SCALISE LEADERSH	IIP FUND			
Mailing Address	PO BOX 9891			
	1			
	ARLINGTON		I VA I	22219
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
П.			int Fundraising Representa	
Full Name				
Mailing Address				
TITLE OR POSITION	C	ITY 🛦	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	C	1	STATE ▲ Telephone Number	ZIP CODE ▲

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

			FEC II	O number	С
			FEC II	O number	С
			FEC II	O number	C
			FEC II	O number	C
ny Connected (Organization, Affil	liated Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spons
JL VICTORY F	UND				
ng Address	PO BOX 341027	,			
	AUSTIN			L_L	78734
ionship:		CITY A		STATE ▲	ZIP CODE ▲
Agent: Identify	by name, address	s (phone number – option	nal)		
me	by name, address	s (phone number – option	nal)	1 1 1 1	
	by name, address	s (phone number – option	nal)		
me	by name, address	s (phone number – option	nal)		
me				STATE A	ZIP CODE A
me		city A		STATE A	ZIP CODE A
ו	JL VICTORY F	JL VICTORY FUND PO BOX 341027 AUSTIN	UL VICTORY FUND PO BOX 341027 AUSTIN COITY ▲	ny Connected Organization, Affiliated Committee, Joint Fundraising Republic VICTORY FUND By Address PO BOX 341027 AUSTIN CITY CITY	po BOX 341027 AUSTIN TX STATE ▲

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
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
WRIGHT VICTORY	FUND		
Mailing Address	75 S HIGH ST		
	STE. 4		
	DUBLIN	OH	43017
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Join y by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Spo
		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi	y by name, address (phone number – optional)		
Designated Agent: Identi	by by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	by by name, address (phone number – optional) CITY		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Pesignated Agent: Identic Full Name	y 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

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	C
-	d Organization, Affiliated Committee, Joint	Fundraising Representativ	re, or Leadership PAC Spons
Mailing Address	PO BOX 752		
	RIFLE	CO	81652
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
-	ify by name, address (phone number – option	iai)	
Full Name	ly by hame, address (phone number – option	nai)	
	ly by hame, address (phone number – option	nai)	
Full Name	Light by marrie, address (priorite number – option	nai)	
Full Name	Light by marrie, address (priorite mumber — option	nai)	
Full Name	CITY	STATE	ZIP CODE A
Full Name	CITY		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ ories: List all banks or other depositories in naintains funds.	STATE A Telephone Number	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit tafety deposit boxes or make the same of Bank,	CITY ▲ ories: List all banks or other depositories in naintains funds.	STATE Telephone Number which the committee deposit	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite the safety deposit boxes or make the safety deposit boxes or	CITY ▲ ories: List all banks or other depositories in naintains funds.	STATE Telephone Number which the committee deposit	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite the safety deposit boxes or make the safety deposit boxes or	CITY ▲ ories: List all banks or other depositories in naintains funds.	STATE Telephone Number which the committee deposit	ts funds, holds accounts, rents

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

r(h). Joint Fur	ndraising Participan	ι.		
1.			FEC ID number	er C
2.			FEC ID number	er C
3.			FEC ID number	er C
4.			FEC ID number	er C
Name of Any Con	nected Organization	n Affiliated Committee Joint E	undraising Banrasants	ntive, or Leadership PAC Sponso
FALLON VICT		i, Aimated Committee, Comt 1	undraising hepresente	are, or Ecadership 1 Ao oponso
Mailing Addre	PO BOX	3653		
	DUBLIN		OH	
Relationship:		CITY A	STATE	▲ ZIP CODE ▲
beolghatea Agent.	i lacitally by flatile, a	ddress (phone number – optiona	1)	
Full Name				
Full Name				
Full Name	s <u> </u>			
_	S			
_	S	CITY	STATE	ZIP CODE A
_		CITY A	STATE A	ZIP CODE A

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

5(g)	or(h). Joint Fundraisii	ng Participant:			
	1.		FEC ID	number C	
	2.		FEC ID	number C	
	3.		FEC ID	number C	
	4.		FEC ID	number C	
6.	Name of Any Connected	Organization, Affiliated Committee, Joir	nt Fundraising Repre	esentative, or L	eadership PAC Sponsor
	NUNES LEADERSH				
	Mailing Address	P.O. BOX 6545			
		VISALIA		CA	93290
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee	X Joint Fundraising I	Representative	Leadership PAC Sponsor
8.	Designated Agent: Identif	y by name, address (phone number – opt	ional)	1 1 1 1	
	Mailing Address	ı			
	3				
	3				
	3				
	TITLE OR POSITION	CITY ▲	ST	TATE A	ZIP CODE A
		▼	ST Telephone Nur		ZIP CODE A
9.	TITLE OR POSITION	ories: List all banks or other depositories i aintains funds.	Telephone Nur	nber e deposits fund	s, holds accounts, rents
9.	Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	ories: List all banks or other depositories i aintains funds.	Telephone Nur	nber e deposits fund	s, holds accounts, rents
9.	Banks or Other Deposite safety deposit boxes or m	ories: List all banks or other depositories i aintains funds.	Telephone Nur	nber e deposits fund	s, holds accounts, rents

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

1						
				FEC	ID number	C
2				FEC	ID number	С
3.				FEC	ID number	С
4.				FEC	ID number	С
Name of A	any Connected	Organization, Afl	filiated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Spons
BETH V	/ICTORY FUN	ID				
Mailin	ng Address	PO BOX 63016	87 			
		IRVING			TX	75063
			CITY ▲		STATE ▲	ZIP CODE ▲
Designated	Agent: Identify	Organization by name, address		Joint Fundraisi	ng Represent	tative Leadership PAC Sp
Designated Full Nar	Connected Agent: Identify me		Affiliated Committee		ng Represent	Leadership PAC Sp
Designated Full Nar	Connected Agent: Identify		Affiliated Committee		ng Represent	Leadership PAC Sp
Designated Full Nar	Connected Agent: Identify me		Affiliated Committee		ng Represent	Leadership PAC Sp
Designated Full Nai Mailing	Connected Agent: Identify me Address	by name, addres	Affiliated Committee			
Designated Full Nai Mailing	Connected Agent: Identify me	by name, addres	Affiliated Committee		STATE A	Leadership PAC Sp

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

1.	
Name of Any Connected Organization, Affiliated Committee, Joint FISCHBACH VICTORY FUND Mailing Address ST 101 ATHENS Relationship: Connected Organization Affiliated Committee Designated Agent: Identify by name, address (phone number – option Full Name Mailing Address TITLE OR POSITION CITY CITY CITY CITY Banks or Other Depositories: List all banks or other depositories in safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	FEC ID number
Name of Any Connected Organization, Affiliated Committee, Joint FISCHBACH VICTORY FUND Mailing Address 824 S MILLEDGE AVE ST 101 ATHENS Relationship: Connected Organization Affiliated Committee Designated Agent: Identify by name, address (phone number – option) Full Name Mailing Address TITLE OR POSITION CITY CITY Banks or Other Depositories: List all banks or other depositories in safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	FEC ID number
Name of Any Connected Organization, Affiliated Committee, Joint FISCHBACH VICTORY FUND Mailing Address 824 S MILLEDGE AVE ST 101 ATHENS Relationship: CITY ▲ Connected Organization Affiliated Committee Designated Agent: Identify by name, address (phone number – option Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ CITY ▲ CITY ▲ CITY ▲ Name of Banks or Other Depositories: List all banks or other depositories in safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	FEC ID number
FISCHBACH VICTORY FUND Mailing Address 824 S MILLEDGE AVE ST 101 ATHENS Relationship: CITY A Connected Organization Affiliated Committee Designated Agent: Identify by name, address (phone number – option for the position of the proposition of the propos	FEC ID number
FISCHBACH VICTORY FUND Mailing Address 824 S MILLEDGE AVE ST 101 ATHENS Relationship: CITY A Connected Organization Affiliated Committee Designated Agent: Identify by name, address (phone number – option for the position of the proposition of the propos	nt Fundraising Representative, or Leadership PAC Spons
Relationship: Connected Organization Affiliated Committee Designated Agent: Identify by name, address (phone number – option Full Name Mailing Address TITLE OR POSITION CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY	
Relationship: Connected Organization Affiliated Committee Connected Organization Affiliated Committee Designated Agent: Identify by name, address (phone number – option Full Name Mailing Address TITLE OR POSITION CITY CITY CITY CITY CITY CITY CITY CITY Banks or Other Depositories: List all banks or other depositories in safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	
Relationship: Connected Organization Affiliated Committee Designated Agent: Identify by name, address (phone number – option Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ CITY ▲ CITY ▲ CITY ▲ Name of Bank, Depository, etc.	
Relationship: Connected Organization Affiliated Committee Designated Agent: Identify by name, address (phone number – option Full Name Mailing Address TITLE OR POSITION CITY CITY CITY CITY CITY CITY CITY CITY CITY Banks or Other Depositories: List all banks or other depositories in safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	
Designated Agent: Identify by name, address (phone number – option Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ Banks or Other Depositories: List all banks or other depositories in safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	GA 30605
Designated Agent: Identify by name, address (phone number – option Full Name	STATE ▲ ZIP CODE ▲
TITLE OR POSITION CITY Banks or Other Depositories: List all banks or other depositories in safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	
Banks or Other Depositories: List all banks or other depositories in safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	
Banks or Other Depositories: List all banks or other depositories in safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	
Banks or Other Depositories: List all banks or other depositories in safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	STATE ▲ ZIP CODE ▲
Name of Bank, Depository, etc.	STATE ▲ ZIP CODE ▲
Safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	Telephone Number
	n which the committee deposits funds, holds accounts, rents
1	
CITY A	

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

1 2 3						
				FEC	ID number	С
3.				FEC	ID number	С
				FEC	ID number	С
4				FEC	ID number	C
Name of A	Any Connected	Organization, Af	filiated Committee, Joint	Fundraising R	epresentativ	e, or Leadership PAC Spons
HICE F	REEDOM FUN	1D				
Mailir	ng Address	2470 DANIELL	S BRIDGE ROAD			
		SUITE 121				
		ATHENS			GA	30606
Relat	tionship:		CITY A		STATE ▲	ZIP CODE ▲
Designated		Organization by name, address	Affiliated Committee	≺ Joint Fundrais	ng Represent	ative Leadership PAC Spo
Full Na	d Agent: Identify				ng Represent	alive Leadership PAC Spc
Full Na	d Agent: Identify				ng Represent	Leadership PAC Spc
Full Na	d Agent: Identify				ng Represent	alive Leadership PAC Spc
Full Na	d Agent: Identify		ss (phone number – optio			
Full Na Mailing	d Agent: Identify	by name, addres			ng Represent	ZIP CODE A

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 Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X	loint Fundraising Represent	Leadership PAC Spo
			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 – optiona		Leadership PAC Spo
Designated Agent: Identification 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 CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	y by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number ich the committee deposi	ZIP CODE A ts funds, holds accounts, rents

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

(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint I	Fundraising Representativ	e, or Leadership PAC Sponsor
MULLIN VICTORY FU	JND		
Mailing Address	332 W. LEE HIGHWAY		
Ü	#303		
	WARRENTON	, , VA ,	, 20186
Dalatianahia			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identify	by name, address (phone number - option	al)	
Designated Agent: Identify Full Name	by name, address (phone number – option	al)	
	by name, address (phone number – option	al)	
Full Name	by name, address (phone number – option	al)	
Full Name	by name, address (phone number – option	al)	
Full Name	CITY A	al) STATE	ZIP CODE A
Full Name	CITY A		ZIP CODE A

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

F BURCHETT	WHITE BRIDGE JITE 207 ASHVILLE			FEC ID number FEC ID number FEC ID number FEC ID number Ing Representative TN	C C C ve, or Leadership	o PAC Spons
BURCHETT 95 St N/	WHITE BRIDGE JITE 207 ASHVILLE	RD		FEC ID number	C C ve, or Leadership	o PAC Spons
BURCHETT 95 St N/	WHITE BRIDGE JITE 207 ASHVILLE	RD		FEC ID number	C re, or Leadership	o PAC Spons
BURCHETT 95 St N/	WHITE BRIDGE JITE 207 ASHVILLE	RD			/e, or Leadership	o PAC Spons
BURCHETT 95 St N/	WHITE BRIDGE JITE 207 ASHVILLE	RD	Joint Fundraisi	ing Representativ		o PAC Spons
St N/	JITE 207 ASHVILLE			TN	37205	
St N/	JITE 207 ASHVILLE			TN	37205	·
St N/	JITE 207 ASHVILLE			TN	37205	
D: Connected Orga	ASHVILLE	CITY A		TN	37205	
c: Connected Orga		CITY A		TN	₁ 37205	
Connected Orga	nization Aff	CITY ▲				
	nization Aff			STATE A	ZIP	CODE A
ss						
OSITION ▼		CITY A		STATE A	ZIP (CODE A
			Telep	hone Number		
	OSITION ▼ Depositories: L	OSITION ▼	OSITION ▼ CITY ▲ Depositories: List all banks or other depositories	OSITION ▼ CITY ▲ Telepi Depositories: List all banks or other depositories in which the	OSITION ▼ CITY ▲ STATE ▲ Telephone Number Depositories: List all banks or other depositories in which the committee depos	OSITION CITY STATE ZIP Telephone Number Depositories: List all banks or other depositories in which the committee deposits funds, holds 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	r C
3.		FEC ID numbe	r C
4		FEC ID numbe	r C
-	d Organization, Affiliated Committee, Joint	Fundraising Representati	tive, or Leadership PAC Spons
TEAM CURTIS JOIN	NT FUNDRAISING COMMITTEE		
Mailing Address	370 EAST SOUTH TEMPLE		
a g	SUITE 580		
	SALT LAKE CITY	l UT	84111
Relationship:	CITY ▲	STATE	▲ ZIP CODE ▲
		Joint Fundraising Represe	
Full Name	1		
Full Name			
		CTATE A	7ID CODE 4
	CITY A	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A	STATE A	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 Number	
Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or many services.	ories: List all banks or other depositories in	Telephone Number	
Mailing Address TITLE OR POSITION	ories: List all banks or other depositories in naintains funds.	Telephone Number	esits funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or management of Bank,	ories: List all banks or other depositories in naintains funds.	Telephone Number	esits funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in naintains funds.	Telephone Number	esits funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in naintains funds.	Telephone Number	esits 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.			FEC	ID number	С
4.			FEC	ID number	С
-	Organization, Affi	iliated Committee, Joint	Fundraising R	epresentativ	e, or Leadership PAC Sponso
KIM VICTORY FUND					
Mailing Address	9460 TEGNER	ROAD			
	HILMAR			CA	95324
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
Designated Agent: Identify Full Name	by name, address	s (phone number – optic	nal)		
Mailing Address	1 , , , , ,				
Ü					
	1		1		
		CITY A		STATE ▲	ZIP CODE A
TITLE OR POSITION	▼	CITY ▲	Telephone		ZIP CODE A

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

(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fo	undraising Representativ	re, or Leadership PAC Sponsor
WALBERG WINNING	UNDER THE OAKS		
Mailing Address	2870 DOBIE ROAD		
gg			
	MASON	, MI,	, 48854
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Designated Agent: Identify	by name, address (phone number - optional	1)	
Designated Agent: Identify	by name, address (phone number – optiona	l)	
	by name, address (phone number – optiona)	
Full Name	by name, address (phone number – optiona	i)	
Full Name	by name, address (phone number – optiona	i)	
Full Name	CITY A		ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
U U U U U U U U U U U U U U U U U U U			
Mailing Address	332 W. LEE HIGHWAY		
	#303		
	WARRENTON	VA V	20186
	CITY A	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joi	nt Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint J		
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint J	nt Fundraising Representation	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint J		
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	Affiliated Committee X Joint J	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	C
4.		FEC ID number	С
-	d Organization, Affiliated Committee, Joint Fun	ndraising Representative	e, or Leadership PAC Spons
MILLER VICTORY I	·UND 		
Mailing Address	228 S. WASHINGTON STREET		
3	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Sp
	fy by name, address (phone number – optional)	oint Fundraising Representa	Leadersnip PAC Sp
esignated Agent: Ident		oint Fundraising Representa	Leadersnip PAC Sp
esignated Agent: Ident		oint Fundraising Representa	Leadersnip PAC Sp
esignated Agent: Ident		oint Fundraising Representa	Leadersnip PAC Sp
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	ZIP CODE A
esignated Agent: Ident	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit	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: Ident 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: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which an aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which an aintains 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 name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which an aintains 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 name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which an aintains funds.	STATE A Telephone Number	ZIP CODE A

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
-	OCMMUTTEE	raising Representative	e, or Leadership PAC Spons
WATKINS VICTORY	COMMITTEE		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Data Carata		STATE ▲	ZIP CODE ▲
	CITY ▲ ed Organization	nt Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Represent	Leadership PAC Spo
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
esignated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
esignated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
esignated Agent: Identi	Affiliated Committee X Join fy by name, address (phone number – optional)	at Fundraising Representa	Leadership PAC Specialists and the second se
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional) CITY		
Connected signated Agent: Identify the signated Agent: Identify the signature of Bank, Connected th	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	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.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundrais	ng Participant:			
1.		FEC ID num	nber C	
2.		FEC ID num	nber C	
3.		FEC ID num	nber C	
4.		FEC ID num	nber C	
_	I Organization, Affiliated Committee, Joint	Fundraising Represer	ntative, or Leadership PA	C Sponso
Mailing Address	824 S MILLEDGE AVE STE 101			
	ATHENS		30605	
Relationship:	CITY ▲	STA	TE ▲ ZIP CC	DE 🛦
	Affiliated Committee X fy by name, address (phone number – option	Joint Fundraising Repo	resentative Leadership	o PAC Spo
Designated Agent: Ident			resentative Leadership	PAC Spo
Designated Agent: Ident			resentative Leadership	PAC Spo
Designated Agent: Ident			resentative Leadership	PAC Spo
Designated Agent: Ident			resentative Leadership	PAC Spo
Designated Agent: Ident	fy by name, address (phone number – option			
Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – option	al)	ZIP COD	
Designated Agent: Ident Full Name	fy by name, address (phone number – option CITY CITY pries: List all banks or other depositories in viaintains funds.	al) STATE Telephone Numbe which the committee decembers the committee decem	ZIP COD	- L
Pesignated Agent: Identification Full Name	fy by name, address (phone number – option CITY CITY pries: List all banks or other depositories in viaintains funds.	al) STATE Telephone Numbe which the committee decembers the committee decem	ZIP COD r	- L

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

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

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2. [FEC ID number	C
3. [FEC ID number	C
4. [FEC ID number	C
6. Name 6	of Any Connected O	rganization, Affiliated Committee, Joint Fu	indraising Representative	e, or Leadership PAC Sponsor
DUN	IN VICTORY FUND) 		
N	lailing Address	12176 CHANCERY STATION CIR		
		RESTON		20190
R	elationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected C	Organization Affiliated Committee X	Joint Fundraising Representa	ative Leadership PAC Sponsor
_	ated Agent: Identify b	oy name, address (phone number – optional)	
Mai	ling Address			
[1]	TLE OR POSITION ▼	CITY A	STATE ▲	ZIP CODE ▲
		CITY A	STATE ▲ Telephone Number	ZIP CODE ▲
9. Banks safety o	or Other Depositorie deposit boxes or main of Bank,	es: List all banks or other depositories in whatains funds.	Telephone Number	s funds, holds accounts, rents
9. Banks safety of Name of Deposit	or Other Depositorie deposit boxes or main of Bank, ory, etc.	es: List all banks or other depositories in whatains funds.	Telephone Number	s funds, holds accounts, rents
9. Banks safety of Name of Deposit	or Other Depositorie deposit boxes or main of Bank,	es: List all banks or other depositories in whatains funds.	Telephone Number	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	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representative	, or Leadership PAC Spon
Mailing Address	120 N CONGRES ST STE 300		
	JACKSON	MS	39201
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	y 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	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rent

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

r(h). Joint Fundraisin	g Participant:			
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
Name of Any Connected	Organization, Affiliated Comm	nittee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
GREG STEUBE VICT	ORY FUND			
Mailing Address	499 SOUTH CAPITOL STREE	ET SW		
	#407			
	WASHINGTON		l DC l	20003
Relationship:	CITY		STATE ▲	ZIP CODE ▲
	I Organization Affiliated Co		undraising Representa	
Full Name				
Mailing Address				
	1			
TITLE OR POSITION	CITY	<u> </u>	STATE A	ZIP CODE A
TITLE OR POSITION	CITY		STATE ▲	ZIP CODE A

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

(h). Joint Fundraisir	ig i artioipariti			
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, Join	t Fundraising Por	veccontativ	o or Londovskin DAC Spons
LATTA VICTORY FU		rundialsing her		e, or Leadership FAC Spons
Mailing Address	9856 ARCHER LANE			
	DUBLIN		OH	43017
Relationship:	CITY A		STATE A	ZIP CODE ▲
	d Organization Affiliated Committee y by name, address (phone number – option	X Joint Fundraising	g Representa	ative Leadership PAC Spo
			g Representa	ative Leadership PAC Spo
Designated Agent: Identif			g Representa	ative Leadership PAC Spo
Designated Agent: Identif			g Representa	Leadership PAC Spo
Designated Agent: Identif			g Representa	Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – option	onal)	Representa	Leadership PAC Spo
Pesignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – option	onal)	STATE A	
Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – option of the price of	Telephone Note the commit	STATE Aumber	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.	y by name, address (phone number – option of the price of	Telephone Note the commit	STATE Aumber	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or mails and mailing the safety deposit boxes or mails and mails	y by name, address (phone number – option of the price of	Telephone N	STATE Aumber	ZIP CODE A

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

1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
GONZALEZ VICTO	RY FUND		
Mailing Address	9856 ARCHER LANE		
Dolotionakia	DUBLIN	OH OTATE A	43017
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
		t Fundraising Represent	Leadership FAC Spc
Designated Agent: Identi		t Fundraising Represent	Leadership FAC Spc
Pesignated Agent: Identi		t Fundraising Represent	Leadership FAC Spc
Pesignated Agent: Identi		t Fundraising Represent	Leadership FAC Spc
Pesignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name L Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A

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

or(h). Joint Fundraising	Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected (BUCKEYE VICTORY	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
BOCKETE VICTORT			
Mailing Address	499 SOUTH CAPITOL STREET SW		
	407		
	WASHINGTON	l DC l	20003
Relationship:	CITY ▲	STATE A	ZIP CODE A
		pint Fundraising Represent	
Full Name			
Mailing Address			
TITLE OR POSITION	UCITY ▲	STATE ▲	ZIP CODE ▲
IIILE ON FOSITION	•	Telephone Number	
		Totophione Hambot	
Ranks or Other Denositor	ies: List all banks or other depositories in whi	ch the committee denosi	te funde holde accounte rent
safety deposit boxes or mai			,
Name of Bank, Depository, etc.			
Mailing Address			
<u>g</u>			

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

(h). Joint Fundraisii	ig Participant:		
1.		FEC ID numb	per C
2.		FEC ID numb	per C
3.		FEC ID numb	per C
4.		FEC ID numb	per C
Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Represent	ative, or Leadership PAC Spons
Mailing Address	1515 BURNT BOAT DR NUM 112		
	BISMARCK	NE NE	58503
Relationship:	CITY A	STATI	E ▲ ZIP CODE ▲
Designated Agent: Identif	d Organization Affiliated Committee	Joint Fundraising Repre	sentative Leadership PAC Sp
Designated Agent: Identif			sentative Leadership PAC Sp
Designated Agent: Identif			Sentative Leadership PAC Sp
Designated Agent: Identif			Sentative Leadership PAC Sp
Pesignated Agent: Identification Full Name Mailing Address	y by name, address (phone number – option		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – option	STATE Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – option CITY CITY pries: List all banks or other depositories in valuations funds.	STATE Telephone Number	ZIP CODE A posits funds, holds accounts, rents
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	y by name, address (phone number – option CITY CITY pries: List all banks or other depositories in valuations funds.	STATE Telephone Number which the committee de	ZIP CODE A posits funds, holds accounts, rents

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
ame of Any Connected JOHN ROSE VICTO	I Organization, Affiliated Committee, Joint Fun PRY FUND	draising Representative	e, or Leadership PAC Spons
1			
Mailing Address	PO BOX 2404		
	COOKEVILLE	TN	38502
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Representa	Leadership FAC Sp
		III Fullulaising nepresenta	Leadership PAC Sp
esignated Agent: Identi		III Fulluraising nepresente	Leadership FAC Sp
esignated Agent: Identi		III Fundraising Represente	Leadership FAC Sp
esignated Agent: Identi		III Fundraising Represente	Leadership FAC 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) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY	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 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 CITY pries: List all banks or other depositories in which paintains 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 pries: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected , HRW VICTORY FUN	Organization, Affiliated Committee, Joint Fundra D	ising Representative	e, or Leadership PAC Sponso
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	by name, address (phone number - optional)		
Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A

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

2000	of	239
-age	OI	

(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
_	Organization, Affiliated Committee, J	oint Fundraising R	epresentativ	e, or Leadership PAC Sponse
TEAM TIMMONS				
Mailing Address	228 S. WASHINGTON ST.		1 1 1 1	
Ç	STE. 115			
	ALEXANDRIA		VA	22314
	OITV		STATE A	ZIP CODE ▲
	d Organization	X Joint Fundraise	ng Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee		ng Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee		ng Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee		ng Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee y by name, address (phone number – o			
Connecte Designated Agent: Identif	d Organization Affiliated Committee y by name, address (phone number – o		ng Represent	Leadership PAC Spo
Connecte Designated Agent: Identification Full Name _ _ Mailing Address	d Organization Affiliated Committee y by name, address (phone number – o		STATE A	
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee by by name, address (phone number – committee) CITY CITY pries: List all banks or other depositorie aintains funds.	optional) Telephone	STATE A Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make of Bank, Depository, etc.	Affiliated Committee by by name, address (phone number – committee) CITY CITY pries: List all banks or other depositorie aintains funds.	Telephone s in which the comm	STATE A Number	ZIP CODE A

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	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
WESTERMAN VICT	ORY FUND		
Mailing Address	PO BOX 21097		
	HOT SPRINGS	AR	71903
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	int 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 CITY pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afty deposit boxes or mame of Bank,	fy 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
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

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

			FEC	ID number	C
				ID number	0
			FEC	ID number	С
			FEC	ID number	С
			FEC	ID number	С
v Connected (Organization. At	filiated Committee. Join	t Fundraising R	epresentativ	e. or Leadership PAC Spons
UDSON					
g Address	824 S MILLED	GE AVE, STE 101			
	ATHENS			GA	30605
onship:		CITY A		STATE ▲	ZIP CODE ▲
	by name, addre		, , ,		
ne 📗 📗	J J J J J J				
ne	by name, addre				
	Line, addre				
	Lilianie, addre	CITY A		STATE A	7ID CODE A
		CITY A		STATE A	ZIP CODE A
	UDSON g Address enship: Connected	g Address 824 S MILLED ATHENS enship: Connected Organization	UDSON 824 S MILLEDGE AVE, STE 101 ATHENS Onship: CITY	ATHENS Connected Organization Affiliated Committee A Joint Fundraisi	ATHENS CITY STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE

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

	aising Participant:				
1.			FEC II) number	С
2.			FEC II) number	С
3			FEC II) number	С
4.			FEC II) number	C
Name of Any Conne	atad Overanization	Affiliated Committee Inint	Frankraiaina Day		e, or Leadership PAC Sponsor
MEUSER VICTO		Anniated Committee, Joint	ruliulaisilig ne	nesentativ	e, or Leadership PAC Sponsor
Mailing Address	499 SOUTH	CAPITOL STREET SW			
	#405				
	WASHINGT	ON	, , , , 1	DC	20003
Relationship:		CITY A		STATE A	ZIP CODE ▲
Conr	nected Organization	Affiliated Committee	Joint Fundraising	Represent	ative Leadership PAC Spor
Full Name					
Mailing Address					
			, , , , , ,	1 1	I I-I
	TION W	CITY A		STATE A	ZIP CODE ▲
TITLE OR POSIT					
TITLE OR POSI		1	Telephone N	umber	- -

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

(h). Joint Fundrais	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	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
VAN TAYLOR VICT	ORY FUND		
Mailing Address	1900 PRESTON ROAD		
	#267 - PMB 229		
	PLANO	TX	75093
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X June 1997 June 1997 Affiliated Committee X June 1997 June	oint Fundraising Represent	ative Leadership PAC Spo
			ative Leadership PAC Spo
Designated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		ative Leadership PAC Spo
Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in white naintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or necessary to the position of Bank,	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in white naintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in white naintains funds.	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	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Mailing Address	10809 GRASSY CREEK PL		
Relationship:	RALEIGH CITY A	NC NC STATE ▲	27614 ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Representa	ative Leadership PAC Spo
	fy by name, address (phone number – optional)		
Designated Agent: Identi Full Name Mailing Address	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	STATE A Telephone Number	ZIP CODE A
Full Name _ _ Mailing Address TITLE OR POSITION	CITY ▲ cries: List all banks or other depositories in which aintains funds.	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 ▲ cries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents

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

h). Joint Fundraisi	.3b		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spons
TEAM HUIZENGA			
Mailing Address	PO BOX 2485		
Mailing Address			
	SPRINGFIELD	ı VA ı	22152
Relationship:	CITY ▲	STATE A	ZIP CODE A
			_
	d Organization Affiliated Committee X y by name, address (phone number – optional	Joint Fundraising Represent	Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optiona		Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional phone in the control of the control o	STATE A	
esignated Agent: Identif	y by name, address (phone number – optiona		
esignated Agent: Identification Full Name _ _ _	y by name, address (phone number – optional opt	STATE Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	y by name, address (phone number – optional opt	STATE Telephone Number	ZIP CODE A
esignated Agent: Identification of the Full Name TITLE OR POSITION anks or Other Depositor	city by name, address (phone number – optional control of the cont	STATE Telephone Number	ZIP CODE A ts funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	city by name, address (phone number – optional control of the cont	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	city by name, address (phone number – optional control of the cont	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	city by name, address (phone number – optional control of the cont	STATE A Telephone Number	ZIP CODE A ts funds, holds accounts, rent

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	С
4.		FEC	ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joi	nt Fundraising R	epresentativ	re, or Leadership PAC Spons
TEAM GT				
Mailing Address	PO BOX 30844			
	BETHESDA		MD	20824
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
Full Name	<u></u>			
Full Name				
Mailing Address	CITY A		STATE A	ZIP CODE A
	CITY A		STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A	Telephone		ZIP CODE A
Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or mail and the composition of Bank, Depository, etc.	ries: List all banks or other depositories aintains funds.	in which the comr	Number	
Mailing Address TITLE OR POSITION Banks or Other Depositor cafety deposit boxes or mainly deposit boxes or mainly deposit boxes.	ries: List all banks or other depositories aintains funds.	in which the comr	Number	ts funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or mail and the composition of Bank, Depository, etc.	ries: List all banks or other depositories aintains funds.	in which the comr	Number	ts funds, holds accounts, rents

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

1						
				FEC I	D number	С
ı				FEC I	D number	С
3. 💷				FEC I	D number	С
4.	1 1 1 1 1			 FEC I	D number	С
Name of	Any Connected	Organization, A	ffiliated Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spons
	R-MEEKS VIC	=				
Mail	ing Address	PO BOX 183				
		HUDSON			WI	54016
Rela	ationship:		CITY A		STATE ▲	ZIP CODE ▲
Designate	ed Agent: Identify	by name, addre	ess (phone number – option	nal)		
Full N	ame	by name, addre	ess (phone number – option	nal)	1 1 1 1	
Full N		by name, addre	ess (phone number – option	nal)		
Full N	ame	by name, addre	ess (phone number – option	nal)		
Full Na	ame		ess (phone number – option	nal)	STATE A	ZIP CODE A
Full Nailing	ame			Telephone N		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	С
	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
RUTHERFORD VIC	IORY FUND 		
Mailing Address	3030 HARTLEY RD		
	STE 120		
	JACKSONVILLE	, , , FL	32257
Relationship:	CITY A	STATE A	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number – entional		
Pesignated Agent: Identi	y 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 TITLE OR POSITION	CITY ▲ CITY ▲ pries: List all banks or other depositories in wh	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or management of the control of the	CITY ▲ CITY ▲ 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 whaintains funds.	STATE A Telephone Number	ts 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 whaintains funds.	STATE A Telephone Number	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	CITY A cries: List all banks or other depositories in whaintains funds.	STATE Telephone Number ich the committee deposit	ts funds, holds accounts, rents

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

1						
				FEC I	D number	C
2. 🔟				FEC I	D number	С
3. 🔟				FEC I	D number	C
4. 🖳				FEC I	D number	С
Name of	Any Connected	Organization, Af	filiated Committee, Joint	Fundraising Re	epresentativ	e, or Leadership PAC Spons
FEENS	STRA VICTOR	Y FUND				
Mail	ing Address	PO BOX 183				
		HUDSON			WI	54016
	tionship:		CITY A		STATE A	ZIP CODE ▲
	Connected	d Organization	Affiliated Committee	Joint Fundraisin	ng Represent	Leadership PAC Spo
Designate Full Na	Connected d Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Na	Connected				ng Represent	Leadership PAC Spo
Designate Full Na	Connected d Agent: Identify				ng Represent	Leadership PAC Spo
Designate Full Nailing	Connected days ame	by name, addre	ss (phone number – option			
Designate Full Na Mailing	Connected d Agent: Identify	by name, addre			STATE A	Leadership PAC Spo

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	С
CALVERT VICTORY	Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	, , , , MD ,	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte Designated Agent: Identif	y by name, address (phone number – optiona	Joint Fundraising Represent	
Designated Agent: Identif			
Designated Agent: Identif			
Designated Agent: Identif	y by name, address (phone number – optiona	l)	
Designated Agent: Identif	y by name, address (phone number – optiona		ZIP CODE A
Pesignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optiona	l)	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Cafety deposit boxes or make the safety deposit boxes or make	y by name, address (phone number – optional control of the control	STATE A Telephone Number	ts funds, holds accounts, rents
Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional control of the control	STATE A Telephone Number	ts funds, holds accounts, rents
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 control of the control	STATE A Telephone Number	ts 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	С
3.			FEC ID number	С
4			FEC ID number	С
Name of Any Connected	Organization, Affiliated C	ommittee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
Mailing Address	320 1ST ST SE			
Relationship:	WASHINGTON		DC DC STATE A	20003 ZIP CODE ▲
				. П
Designated Agent: Identi	Affiliated Affiliated fy by name, address (phone		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi			t Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi			t Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi			t Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone		state A	ZIP CODE A
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone	number – optional)		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone CI Ories: List all banks or othe	number – optional)	STATE A	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Identic Full Name	fy by name, address (phone CI Ories: List all banks or othe	number – optional)	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 Fundraisi	ng Participant:		
1.		FEC ID number	er C
2.		FEC ID number	er C
3.		FEC ID numbe	er C
4.		FEC ID number	er C
Name of Any Connected	Organization, Affiliated Committee, Joint F	Fundraising Representa	itive, or Leadership PAC Spons
LAWLER VICTORY	FUND		
Mailing Address	PO BOX 87		
	SOUTH SALEM	NY	
Relationship:	CITY ▲	STATE	ZIP CODE ▲
	d Organization Affiliated Committee X y by name, address (phone number – options	Joint Fundraising Repres	entative Leadership PAC Spo
Designated Agent: Identif			entative Leadership PAC Spo
Designated Agent: Identif			entative Leadership PAC Spo
Designated Agent: Identif			entative Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – options	al)	
Designated Agent: Identif	y by name, address (phone number – options		
Designated Agent: Identification Full Name Mailing Address	y by name, address (phone number – options	al)	
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – options CITY CITY pries: List all banks or other depositories in waintains funds.	STATE 4	ZIP CODE A osits funds, holds accounts, rents
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 – options CITY CITY pries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A osits funds, holds accounts, rents

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

			. I FFC I		
				D number	C
			FEC I	D number	C
			FEC I	D number	С
			 FEC I	D number	С
ny Connected	Organization, Af	filiated Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spons
ER FOR MISS	OURI				
ng Address	PO BOX 183				
	HUDSON			WI	54016
ionship:		CITY A		STATE A	ZIP CODE ▲
l Agent: Identify	by name, addres	ss (phone number – option	nal)		
me	by name, addres	ss (phone number – option	nal)	1 1 1	
	by name, addres	ss (phone number – option	nal)		
me	by name, addres	ss (phone number – option	nal)		
me	by name, address		nal)	STATE A	ZIR CODE A
me		ss (phone number – option	nal)	STATE A	ZIP CODE A
	g Address	g Address PO BOX 183 HUDSON	g Address PO BOX 183 HUDSON Onship: CITY	g Address PO BOX 183 HUDSON Onship: CITY	g Address PO BOX 183 HUDSON Onship: CITY STATE

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

y Connected			FEC I	D number D number D number	C
y Connected			FEC I		С
y Connected				D number	
y Connected			ı FEC I		C
y Connected				D number	С
	Organization, A	ffiliated Committee, Join	t Fundraising Re	presentativ	e, or Leadership PAC Spons
VICTORY C	OMMITTEE				
Address	555 METRO F	PLACE NORTH			1 1 1 1 1 1 1 1 1
	525				
	DUBLIN			ОН	43017
nship:		CITY A		STATE ▲	ZIP CODE ▲
e				1 1 1 1	
4.1	1				
ddress					
ddress					
ddress		CITY		CTATE	7ID CODE A
oddress	\	CITY A		STATE A	ZIP CODE A
	Connected Agent: Identify	DUBLIN Connected Organization Agent: Identify by name, addre	DUBLIN Connected Organization Affiliated Committee Agent: Identify by name, address (phone number – option	DUBLIN Connected Organization Affiliated Committee Agent: Identify by name, address (phone number – optional)	DUBLIN Connected Organization Affiliated Committee X Joint Fundraising Representation Agent: Identify by name, address (phone number – optional)

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
Jame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e or Leadership PAC Spons
HAGEMAN VICTOR			,
Mailing Address	P.O. BOX 4157		
	CHEYENNE	WY	82003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Pesignated Agent: Identi	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		CTATE A	7ID CODE A
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE
Full Name Mailing Address TITLE OR POSITION Fanks or Other Deposite afety deposit boxes or mail arms of Bank,	CITY A pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, ren
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second process of the second	CITY A pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second process of the second	CITY A pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents

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

(h). Joint Fundrais	ng Participant:			
1.		FE	C ID number	С
2.		FE	C ID number	С
3.		FE	C ID number	С
4.		 	C ID number	С
Name of Any Connected	Organization, Affiliated Committee	, Joint Fundraising	Representativ	re, or Leadership PAC Spons
KEAN VICTORY FU	ND			
Mailing Address	PO BOX 999			
	EDISON		NJ	08818
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Affiliated Committee fy by name, address (phone number		aising Represent	tative Leadership PAC Spo
Designated Agent: Ident	_		aising Represent	tative Leadership PAC Spo
Designated Agent: Ident	_		aising Represent	tative Leadership PAC Spo
Designated Agent: Ident	_		aising Represent	Leadership PAC Spo
Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number		aising Represent	Leadership PAC Spo
Designated Agent: Ident	fy by name, address (phone number	- optional)		
Designated Agent: Ident Full Name	fy by name, address (phone number CITY CITY pries: List all banks or other deposite aintains funds.	- optional) Telephor	STATE And ne Number	ZIP CODE A ts funds, holds accounts, rents
Pesignated Agent: Identification of Bank, Depository, etc.	fy by name, address (phone number CITY CITY pries: List all banks or other deposite aintains funds.	- optional) Telephore	STATE And ne Number	ZIP CODE A ts 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.		FEC ID number	С
4.		FEC ID number	С
-	I Organization, Affiliated Committee, Joint Fur DRAISING COMMITTEE	draising Representative	e, or Leadership PAC Spons
Mailing Address	POST OFFICE BOX 905		
	TUPELO	MS	38802
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number – optional)		
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	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ cries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit tafety deposit boxes or make the same of Bank,	CITY ▲ cries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite the safety deposit boxes or make the safety deposit boxes or	CITY ▲ cries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite the safety deposit boxes or make the safety deposit boxes or	CITY ▲ cries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rents

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 Fu	ndraising Representativ	e, or Leadership PAC Sponso
JOHNSON LEADER	SHIP FUND		
Mailing Address	2900 CLEARVIEW PKWY		
	SUITE 206		
	METAIRIE	LA L	70006
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X J fy by name, address (phone number – optional)	oint Fundraising Represent	
Designated Agent: Ident			
Designated Agent: Ident			
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		ZIP CODE A
Designated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		
Pesignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit bafety deposit boxes or not be made and the safety deposit boxes.	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
Pesignated Agent: Identification Full Name	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

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

or(h). Joint Fundraising	Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.	<u> </u>	FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint F	undraising Representativ	re, or Leadership PAC Sponsor
STEIL VICTORY FUN			
Mailing Address	1818 MILTON AVE		
	#1448 		
	JANESVILLE	wi j	53545
Relationship:	CITY A	STATE A	ZIP CODE ▲
Designated Agent: Identify	by name, address (phone number - optiona	al)	
Full Name			
Mailing Address			
	1		I I-I
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
	· 	Telephone Number	
Banks or Other Depositorisafety deposit boxes or main Name of Bank, Depository, etc. Mailing Address	es: List all banks or other depositories in water materials.		ts funds, holds account
	CITY ▲	STATE ▲	ZIP CODE ▲

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

			FEC I	O number	С
			FEC I	O number	С
			FEC I	O number	C
			FEC I	O number	С
Any Connected	Organization, Affi	liated Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spons
BACK THE HO	USE 2022				
ng Address	PO BOX 30844				1 1 1 1 1 1 1 1 1 1
	BETHESDA			MD	20824-0844
tionship:		CITY A		STATE A	ZIP CODE ▲
d Agent: Identify	by name, address	s (phone number – option	nal)		
ame	by name, address	s (phone number – option	nal)		
	by name, address	s (phone number – option	nal)		
ame	by name, address	s (phone number – option	nal)		
ame		s (phone number – option	nal)	STATE A	ZIP CODE A
ame			Telephone N		ZIP CODE A
1	BACK THE HO	BACK THE HOUSE 2022 ng Address PO BOX 30844 BETHESDA	BACK THE HOUSE 2022 ng Address PO BOX 30844 BETHESDA tionship: CITY	Any Connected Organization, Affiliated Committee, Joint Fundraising Repartment of the BACK THE HOUSE 2022 PO BOX 30844 BETHESDA tionship: CITY CITY	ng Address PO BOX 30844 BETHESDA MD STATE STATE

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

	Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
		•	
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Sponsor
ROGER FOR CONGR	RESS VICTORY FUND		
Mailing Address	10 N. CADDO ST.		
	PMB #174		
	CLEBURNE	, TX	76031
Relationship:	CITY A	STATE A	ZIP CODE ▲
		oint Fundraising Representa	
esignated Agent: Identify	by name, address (phone number - optional)		
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A

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

1			
2		FEC ID number	С
<u> </u>		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
Chris Stewart Freedo	m Fund		
Market Address	610 S. BOULEVARD		
Mailing Address			
			20000
	TAMPA	FL	33606
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identify	by name, address (phone number – optional)		
Designated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:			
1.		FEC	ID number	С
2.		FEC	ID number	С
3.		FEC	ID number	C
4.		FEC	ID number	С
Name of Any Connected	l Organization, Affiliated Committee, Jo	oint Fundraising R	epresentativ	e, or Leadership PAC Spons
Mailing Address	228 S. WASHINGTON STREET			
	SUITE 115			
	ALEXANDRIA		VA	22314
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Affiliated Committee fy by name, address (phone number – o	X Joint Fundraisi	ng Represent	ative Leadership PAC Spo
Designated Agent: Identi			ng Represent	ative Leadership PAC Spo
Designated Agent: Identi			ng Represent	ative Leadership PAC Spo
Designated Agent: Identi			ng Represent	ative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – o			
Designated Agent: Identi	fy by name, address (phone number – o		ng Represent	Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – o		STATE A	
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – of the control	otional) Telephone	STATE A Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or management of Bank, Depository, etc.	fy by name, address (phone number – of the control	Telephone in which the comr	STATE A Number	ZIP CODE A

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

AUL TEXA	S VICTORY		£ 400	FEC FEC	C ID number		ership PAC Spons
dress Connected	S VICTORY 1005 CONG AUSTIN	RESS AVE STE	£ 400	FEC	C ID number	C C e, or Leade	ership PAC Spons
dress Connected	S VICTORY 1005 CONG AUSTIN	RESS AVE STE	£ 400	FEC	C ID number	c, or Leade	ership PAC Spons
dress Connected	S VICTORY 1005 CONG AUSTIN	RESS AVE STE	£ 400			e, or Leade	ership PAC Spons
dress Connected	S VICTORY 1005 CONG AUSTIN	RESS AVE STE	£ 400	Fundraising	Representativ		ership PAC Spons
dress Connected	S VICTORY 1005 CONG AUSTIN	RESS AVE STE	£ 400		nepresentativ		ership PAC Spons
ip: Connected	AUSTIN	CIT			, TX	70700	
ip: Connected	AUSTIN	CIT			, TX	7070	
Connected			Y A		, TX ,	7070	
Connected			Y A		, TX	7070	
Connected	Organization		Y 🔺			7870	1 -
	Organization				STATE A		ZIP CODE ▲
	1						
ess							
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POSITION 1	7	CITY	A		STATE A		ZIP CODE ▲
				Telephone	e Number		
	Depositorie	POSITION V	CITY Depositories: List all banks or other decompositions.	CITY ▲ Depositories: List all banks or other depositories in	CITY ▲ CITY ▲ Depositories: List all banks or other depositories in which the con	CITY ▲ STATE ▲ COSITION ▼ Telephone Number Depositories: List all banks or other depositories in which the committee deposit	CITY ▲ STATE ▲ CITY ▲ Telephone Number — — Depositories: List all banks or other depositories in which the committee deposits funds, how

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

1.						
٠ ا ،				FEC	ID number	C
2. 🔟				FEC	ID number	С
3. 🔟				FEC	ID number	C
4				FEC	ID number	С
	Any Connected ERGMAN VIC			Fundraising Re	epresentativ	e, or Leadership PAC Spons
Maili	ing Address	824 S. MILLE	DGE AVE			
		SUITE 101				
		ATHENS			GA	30605
			CITY A		STATE ▲	ZIP CODE ▲
		d Organization		Joint Fundraisii	ng Represent	tative Leadership PAC Sp
Designate Full Na	Connected d Agent: Identify		Affiliated Committee		ng Represent	Leadership PAC Sp
Designate Full Na	Connected		Affiliated Committee		ng Represent	Leadership PAC Sp
Designate Full Na	Connected d Agent: Identify		Affiliated Committee		ng Represent	Leadership PAC Sp
Designate Full Na	Connected d Agent: Identify		Affiliated Committee			
Designate Full Na Mailing	Connected d Agent: Identify	by name, addre	Affiliated Committee		Represent	Leadership PAC Sp

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

1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connecte	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponso
ADRIAN SMITH VI	CTORY FUND		
Mailing Address	228 S. WASHINGTON STREET		
-	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint In the Joint In	int Fundraising Representa	ative Leadership PAC Spo
		int Fundraising Representa	Leadership PAC Spo
Designated Agent: Iden		int Fundraising Representa	Leadership PAC Spo
Designated Agent: Iden Full Name		int Fundraising Representa	Leadership PAC Spo
Designated Agent: Iden Full Name		int Fundraising Representa	Leadership PAC Spo
Designated Agent: Iden Full Name	ify by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Spo
Designated Agent: Iden Full Name Mailing Address	ify by name, address (phone number – optional)		
Designated Agent: Iden Full Name _ _ Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional) CITY CITY tories: List all banks or other depositories in which naintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Iden Full Name	ify by name, address (phone number – optional) CITY CITY tories: List all banks or other depositories in which naintains funds.	STATE A Telephone Number	ZIP CODE A

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

1				FEC II	0 number	C	
2.				FEC II	0 number	С	
3.				FEC II	O number	С	
4.				FEC II	0 number	С	
							
	•		liated Committee, Joint	Fundraising Re	oresentativo	e, or Leadersh	ip PAC Spons
WITTMA	N VICTORY (
Mailing	g Address	P.O. BOX 26141					
		ALEXANDRIA		, , , , I	VA	22313	-
Relatio	onship:		CITY A		STATE A	Z	IP CODE ▲
esignated /		Organization by name, address	Affiliated Committee	Joint Fundraisin	g Representa	ative Lead	dership PAC Sp
esignated /	Agent: Identify				g Representa	ative Lead	dership PAC Sp
_	Agent: Identify				g Representa	ative Lead	dership PAC Sp
Full Nam	Agent: Identify				g Representa	ative Lead	dership PAC Sp
Full Nam	Agent: Identify				g Representa	ative Lead	dership PAC Sp
Full Nam	Agent: Identify	by name, address		nal)	g Representa		dership PAC Sp

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

	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 Fun	draising Representative	e, or Leadership PAC Sponsor
BALDERSON VICTOR	RY COMMITTEE		
Mailing Address	P.O. BOX 26141		<u> </u>
	1		
	ALEXANDRIA	ı ı VA ı	22313
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Representa	
Connected esignated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
resignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
resignated Agent: Identify Full Name	CITY A	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	CITY A	STATE A Telephone Number	ZIP CODE A

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

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.	-	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
	ARRINGTON VICTOR	RY COMMITTEE		
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	0000.00	Organization Affiliated Committee X Joint F	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
9.	Full Name _ _	CITY CITY Tele ies: List all banks or other depositories in which the intains funds.	ephone Number	s funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Tele ies: List all banks or other depositories in which the intains funds.	ephone Number	s funds, holds accounts, rents

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	С
4.		FEC ID number	С
lome of Any Connector	Organization, Affiliated Committee, Joint Fund	Iraiaina Danyacantatiya	or Leadership DAC Spane
GREG PENCE VICT	_	indisting nepresentative	, or Leadership FAC Sports
Mailing Address	P.O. BOX 275		
	TAYLORSVILLE	IN I	47280
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	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		CTATE A	ZIR CODE A
Full Name	CITY	STATE A	ZIP CODE A
Full Name L L L L L L L L L L L L L L L L L L L	CITY A	1	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank, epository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second process of the second	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	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.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
AMERICAN DREA	M VICTORY FUND		
Mailing Address	9070 IRVINE CENTER DRIVE		
	SUITE 150		
	IRVINE	CA CA	92618
		STATE ▲	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Spo
Connection Connectica Connection Connection Connection Connection Connection Connectica Connection			ative Leadership PAC Spo
Connect Connec	eted Organization Affiliated Committee X Jo		ative Leadership PAC Spo
Connection Connectica Connection Connection Connection Connection Connection Connectica Connection	eted Organization Affiliated Committee X Jo		ative Leadership PAC Spo
Connect Connec	eted Organization Affiliated Committee X Jo		ative Leadership PAC Spo
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Connect Connec	atted Organization Affiliated Committee X Journal Affiliated C		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	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
GIMENEZ VICTORY	COMMITTEE		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	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 CITY pries: List all banks or other depositories in which aintains funds.	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 which aintains funds.	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 which aintains funds.	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundraisi	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	l Organization, Affiliated Committee, Joint Fun	draising Representativ	e or Leadershin PAC Snons
BURGESS VICTOR			
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Dalatianahini	CITY A	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Jo		
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY CITY	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Designation of Bank, Depository, etc.	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A

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

Organization, Affiliated Committee, Joint Fundamental States of the Stat	FEC ID number FEC ID number FEC ID number FEC ID number draising Representative	C C C , or Leadership PAC Spons
/ICTORY FUND 824 S MILLEDGE AVE	FEC ID number	C
/ICTORY FUND 824 S MILLEDGE AVE	FEC ID number	С
/ICTORY FUND 824 S MILLEDGE AVE		
/ICTORY FUND 824 S MILLEDGE AVE	draising Representative	, or Leadership PAC Spons
/ICTORY FUND 824 S MILLEDGE AVE	uraising nepresentative	, or Leadership FAC Sporis
SUITE 101		
ATHENS	GA GA	30605
CITY A	SIAIE	ZIP CODE ▲
	1 - 1 . 1 -	- I I_I
▼ CITY ▲	STATE ▲	ZIP CODE ▲
_	CITY d Organization Affiliated Committee y by name, address (phone number – optional)	d Organization Affiliated Committee X Joint Fundraising Representat

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	C
Name of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representative	, or Leadership PAC Sponso
Mailing Address	2430 VANDERBILT BEACH ROAD		
	STE 108 PMB 260		
	NAPLES	, , , FL	34108
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	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	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ cries: List all banks or other depositories in which anintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be boxed by the boxed	CITY ▲ cries: List all banks or other depositories in which anintains funds.	Telephone Number	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	С
2.		FEC ID	number	С
3.		FEC ID	number	C
4		FEC ID	number	C
Name of Any Connected	Organization, Affiliated Committee, Join	t Fundraising Rep	resentativ	e, or Leadership PAC Spons
OKEEN VIOTOKI I				
Mailing Address	PO BOX 2706			
	BRENTWOOD	1	TN	37024
Relationship:	CITY A		STATE A	ZIP CODE ▲
Connecte		X Joint Fundraising	Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee		Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi	d Organization Affiliated Committee		Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee		Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee Ty by name, address (phone number – option	onal)		
Connecte Designated Agent: Identi Full Name	Affiliated Committee Ty by name, address (phone number – option	onal)	Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee Ty by name, address (phone number – option	onal)	STATE A	
Connecte Designated Agent: Identi 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 aintains funds.	Telephone No	STATE Aumber Lee deposit	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Deposite afety deposit boxes or make the property of the pro	Affiliated Committee Ty by name, address (phone number – option CITY CITY pries: List all banks or other depositories in aintains funds.	Telephone No	STATE Aumber Lee deposit	ZIP CODE A

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

1.	or (h). Joint Fundraising	y Participant:		
STATE A STATE A TITLE OR POSITION ▼ FEC ID number C C FEC ID number C FEC ID number C FEC ID number C C FEC ID number C FEC ID numb	1.		FEC ID number	С
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spons LESKO VICTORY COMMITTEE Mailing Address 228 S WASHINGTON STREET SUITE 115 ALEXANDRIA Connected Organization Affiliated Committee STATE ZIP CODE Mailing Address Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY STATE ZIP CODE ZIP CODE ZIP CODE STATE ZIP CODE ZIP CODE	2.		FEC ID number	С
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spons LESKO VICTORY COMMITTEE Mailing Address 228 S WASHINGTON STREET SUITE 115 ALEXANDRIA VA 22314 Affiliated Committee Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Leadership PAC Spons TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲ ZIP CODE ▲	3.	<u> </u>	FEC ID number	С
LESKO VICTORY COMMITTEE Mailing Address 228 S WASHINGTON STREET SUITE 115 ALEXANDRIA Pelationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	4.		FEC ID number	С
LESKO VICTORY COMMITTEE Mailing Address 228 S WASHINGTON STREET SUITE 115 ALEXANDRIA Pelationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲				
Mailing Address 228 S WASHINGTON STREET SUITE 115 ALEXANDRIA Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp Designated Agent: Identify by name, address (phone number − optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲ ZIP CODE ▲			undraising Representativ	e, or Leadership PAC Sponsor
SUITE 115 ALEXANDRIA Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲				
Mailing Address SUITE 115 ALEXANDRIA CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲				
ALEXANDRIA Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address X Joint Fundraising Representative Leadership PAC Sp	Mailing Address	228 S WASHINGTON STREET		<u> </u>
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲		SUITE 115		
Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp Designated Agent: Identify by name, address (phone number – optional) Full Name		ALEXANDRIA	VA	22314
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲	Connected	Organization Affiliated Committee X	Joint Fundraising Represent	ative Leadership PAC Spon
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	Full Name			
TITLE OR POSITION ▼	Mailing Address			
TITLE OR POSITION ▼				
TITLE OR POSITION ▼				
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			Telephone Number	
	safety deposit boxes or mai	ntains funds.		
safety deposit boxes or maintains funds.				
safety deposit boxes or maintains funds. Name of Bank, Depository, etc.				
Name of Bank,	Mailing Address			
Name of Bank, Depository, etc.	Mailing Address			
Name of Bank, Depository, etc.	Mailing Address			

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
Name of Any Connected	Organization, Affiliated Committee, Join	t Fundraising Repr	esentative	e, or Leadership PAC Spons
TIFFANY VICTORY	FUND			
Mailing Address	PO BOX 30844			
	BETHESDA		MD	20824
Relationship:	CITY A		STATE A	ZIP CODE ▲
Connecte		X Joint Fundraising	Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee	X Joint Fundraising	Representa	Leadership PAC Spo
Connecte Designated Agent: Identi	d Organization Affiliated Committee	X Joint Fundraising	Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee	X Joint Fundraising	Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee Ty by name, address (phone number – opti	X Joint Fundraising		
Connecte Designated Agent: Identi Full Name	Affiliated Committee Ty by name, address (phone number – opti	X Joint Fundraising	Representa	Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	Affiliated Committee Ty by name, address (phone number – opti	X Joint Fundraising	TATE A	
Connecte Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Ty by name, address (phone number – option of the committee) CITY CITY Ories: List all banks or other depositories in aintains funds.	X Joint Fundraising onal) S Telephone Nu	TATE mber	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Designation of Bank, Depository, etc.	Affiliated Committee Ty by name, address (phone number – option of the committee) CITY CITY Ories: List all banks or other depositories in aintains funds.	X Joint Fundraising onal) S Telephone Nu	TATE mber	ZIP CODE A

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
-	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
HERN VICTORY FU	טאו 		
Mailing Address	8630 S PEORIA AVE		
	TULSA	OK	74132
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which an intains funds.	STATE A Telephone Number	ZIP CODE A
connecte esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which an intains funds.	STATE A Telephone Number	ZIP CODE A
connecte esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Jo fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which an intains funds.	STATE A Telephone Number	ZIP CODE A

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

Participant:		
	FEC ID number	С
	FEC ID number	С
	FEC ID number	С
	FEC ID number	C
Organization, Affiliated Committee, Joint I	Fundraising Representativ	re, or Leadership PAC Sponso
RS WIN THE FUTURE FUND		
PO BOX 2485		
SPRINGFIELD		22152
CITY ▲	STATE A	ZIP CODE ▲
James address (priorie namber option		
1		I I-I
CITY A	STATE A	ZIP CODE A
CITY ▲	STATE ▲	ZIP CODE
CITY A ies: List all banks or other depositories in wintains funds.	Telephone Number	
ies: List all banks or other depositories in w	Telephone Number	
	PO BOX 2485 SPRINGFIELD CITY Organization Affiliated Committee	FEC ID number FEC ID number FEC ID number FEC ID number Organization, Affiliated Committee, Joint Fundraising Representative RS WIN THE FUTURE FUND PO BOX 2485 SPRINGFIELD VA STATE

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

h). Joint Fundrais	•		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
JEANNE VICTORY	FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	fy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)		
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of the content of	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which naintains 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 name of Bank,	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which naintains 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 name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which naintains 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 name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which naintains funds.	STATE A Telephone Number	ZIP CODE A

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

	_	Participant:				
1.					FEC ID number	С
2.					FEC ID number	С
3					FEC ID number	С
4					FEC ID number	C
Name of An	v Connected C	Organization, A	ffiliated Committee, Jo	oint Fundrais	sing Representativ	ve, or Leadership PAC Sponsor
	EIS VICTORY					
Mailing	g Address	PO BOX 3084	.4			
		BETHESDA			MD	20824
Relatio	nship:		CITY A		STATE A	ZIP CODE ▲
		by name, addre	ess (phone number – o	ptional)		
Full Nam	ne	by name, addre	ess (phone number – o	ptional)		
	ne	by name, addre	ess (phone number - o	ptional)		
Full Nam	ne	by name, addre	ess (phone number – o	ptional)		
Full Nam	ne			ptional)	STATE A	ZIP CODE A
Full Nam	ne		ess (phone number – o		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	С
3.		FEC ID number	С
4.		FEC ID number	С
_	I Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
Relationship:	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi			
Pesignated Agent: Identi			
Pesignated Agent: Identi			
Pesignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A elephone Number the committee deposit	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or make the control of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A elephone Number the committee deposit	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the state of Bank, Depository, etc.	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A
Pesignated Agent: Identification of Bank, Depository, etc.	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A

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

(h). Joint Fundraisin	9 · ·····		
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 Fu	ndraising Representativ	e. or Leadership PAC Spons
TEAM FITZ			
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee X by name, address (phone number – optional	oint Fundraising Represent	ative Leadership PAC Sp
Designated Agent: Identify Full Name			ative Leadership PAC Spo
Designated Agent: Identify			ative Leadership PAC Spo
Designated Agent: Identify Full Name			ative Leadership PAC Spo
Designated Agent: Identify Full Name	by name, address (phone number – optional		
Designated Agent: Identify Full Name	by name, address (phone number – optional		Ative Leadership PAC Spo
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional		
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or mail Mame of Bank, Depository, etc.	cies: List all banks or other depositories in whintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito tafety deposit boxes or mails and mailing and mai	cies: List all banks or other depositories in whintains funds.	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:			
1.		FEC I	D number	С
2.		FEC I	D number	С
3.		FEC I	D number	C
4.		FEC I	D number	C
Name of Any Connected	Organization, Affiliated Committee, Jo	oint Fundraising Re	presentativ	e, or Leadership PAC Spons
Mailing Address	9070 IRVINE CENTER DRIVE #150			
	IRVINE		CA	92618
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee y by name, address (phone number – o	X Joint Fundraisir	ng Represent	ative Leadership PAC Spo
Designated Agent: Identi			ng Represent	ative Leadership PAC Spo
Designated Agent: Identi			ng Represent	ative Leadership PAC Spo
Designated Agent: Identi			ng Represent	Leadership PAC Spo
Designated Agent: Identi	y by name, address (phone number – o			
Designated Agent: Identi	y by name, address (phone number – o		Representation of the second o	Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	y by name, address (phone number – o		STATE A	
Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – of the control o	ptional) Telephone 1	STATE A Number	ZIP CODE A
Pesignated Agent: Identi Full Name	y by name, address (phone number – of the control o	Telephone Notes in which the comme	STATE A Number	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Sponso
Mailing Address	824 S MILLEDGE AVE STE 101		
0			
Deletionalia	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	y by name, address (phone number – optional)	STATE A	Leadership PAC Spo
Designated Agent: Identi	y by name, address (phone number – optional)		
Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name	y 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

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	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fu	ndraising Representativ	re, or Leadership PAC Sponso
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X	loint Fundraising Represent	ative Leadership PAC Spo
			ative Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional		Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional		ZIP CODE
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional		
Designated Agent: Identi Full Name	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 ts funds, holds accounts, rents
Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or management of Bank, Depository, etc.	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 ts funds, holds accounts, rents

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

1			
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
_	Organization, Affiliated Committee, Joint F	Fundraising Representativ	re, or Leadership PAC Spons
Mailing Address	50 S JONES BLVD STE 201		
	LAS VEGAS	NV	89107
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Full Name			
Full Name			
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A	STATE Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail arms of Bank,	pries: List all banks or other depositories in waintains funds.	Telephone Number	ts funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or main and the safety deposit boxes or main and the safety depository, etc.	pries: List all banks or other depositories in waintains funds.	Telephone Number	ts funds, holds accounts, rents

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

(h). Joint Fundraisin	g i ai doipailt.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
Mailing Address	2318 CURTIS STREET		
J			
Relationship:	DENVER CITY A	CO STATE ▲	80205 ZIP CODE ▲
_			П
	d Organization Affiliated Committee X Joint by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identify		t Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identify		t Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identify		t Fundraising Represent	Leadership PAC Spo
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	t Fundraising Represent	ZIP CODE A
esignated Agent: Identify	by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which	STATE A elephone Number the committee deposit	ZIP CODE A
Full NameMailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mailing and mailin	ries: List all banks or other depositories in which	STATE A elephone Number the committee deposit	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mailane of Bank, repository, etc	ries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mailane of Bank, repository, etc	ries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A

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

1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected (Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
NANCY MACE VICTO	RY FUND		
Mailing Address	228 S. WASHINGTON ST.		
, and the second	STE. 115		
	ALEXANDRIA	ı VA	22314
Relationship:			
neiationship.	CITY A	STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee X Joi by name, address (phone number – optional)	int Fundraising Representa	Leadership PAC Spon
		int Fundraising Representa	Leadership PAC Spons
esignated Agent: Identify		int Fundraising Representa	Leadership PAC Spons
esignated Agent: Identify Full Name		int Fundraising Representa	Leadership PAC Spons
esignated Agent: Identify Full Name		int Fundraising Representa	Leadership PAC Spons
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Spons
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		

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

(h). Joint Fundrais	sing Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
VICTORIA VICTOR	RY FUND		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Ider	tify by name, address (phone number - optional)		
Designated Agent: Ider	tify by name, address (phone number – optional)		
	tify by name, address (phone number – optional)		
Full Name	tify by name, address (phone number – optional)		
Full Name	tify by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name L	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITIO	CITY ▲ tories: List all banks or other depositories in which maintains funds.	elephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositatety deposit boxes or Name of Bank,	CITY ▲ tories: List all banks or other depositories in which maintains funds.	elephone Number the committee deposits	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depose afety deposit boxes or other deposit boxes or other Depose afety depo	CITY ▲ tories: List all banks or other depositories in which maintains funds.	elephone Number the committee deposits	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depose afety deposit boxes or other deposit boxes or other Depose afety depo	CITY ▲ tories: List all banks or other depositories in which maintains funds.	elephone Number the committee deposits	s funds, holds accounts, rents

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

(h). Joint Fundraisi	ig raiticipant.		
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	ve, or Leadership PAC Spons
Mailing Address	P.O. BOX 2811		
Maining Addition			
	LAKELAND	FL FL	33806
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee X	oint Fundraising Represen	tative Leadership PAC Spo
Designated Agent: Identi			tative Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	by by name, address (phone number – optional		Leadership PAC Spo
Pesignated Agent: Identi Full Name _ _ Mailing Address TITLE OR POSITION	y by name, address (phone number – optional	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name _ _ Mailing Address TITLE OR POSITION	y 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
Pesignated Agent: Identi Full Name	y by name, address (phone number – optional CITY A CITY A pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number ich the committee depos	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	С
ame of Any Connected UNITED TO WIN	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
Mailing Address	PO BOX 9891		
	ARLINGTON	VA VA	22219
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X June 1985 Affiliated Commit	oint Fundraising Represent	ative Leadership PAC Sp
		pint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		pint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		pint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	oint Fundraising Represent	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) CITY CITY pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number	ZIP CODE A
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 pries: List all banks or other depositories in while aintains funds.	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 while aintains funds.	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 while aintains funds.	STATE A Telephone Number	ZIP CODE A

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

(h). Joint Fundraisi	ng Participant:			
1.		FEC	D number	С
2.		FEC	D number	С
3		FEC	D number	C
4		FEC	D number	C
Name of Any Connected	Organization, Affiliated Committee, Jo	int Fundraising Re	epresentativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 7244			
	LITTLE ROCK		AR	72217
Dalatianahina	CITY ▲		STATE ▲	ZIP CODE ▲
	Affiliated Committee Ty by name, address (phone number – op	X Joint Fundraisin	ng Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee		ng Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi	d Organization Affiliated Committee		ng Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization Affiliated Committee		ng Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee Ty by name, address (phone number – op			
Connecte Designated Agent: Identi Full Name	Affiliated Committee Ty by name, address (phone number – op		Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee Ty by name, address (phone number – op		STATE A	
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Ty by name, address (phone number – operations) CITY CITY Ories: List all banks or other depositories aintains funds.	otional) Telephone	STATE A Number	ZIP CODE A ts funds, holds accounts, rents
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Deposite Sanks or Other Deposite Sanks Open S	Affiliated Committee Ty by name, address (phone number – operations) CITY CITY Ories: List all banks or other depositories aintains funds.	Telephone in which the comm	STATE A Number	ZIP CODE A ts funds, holds accounts, rents

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

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
6. Name	of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	ing Donrocontative	or Londovskin DAC Spansov
	ROW THE MAJORIT		ing nepresentative	e, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	, VA	22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fu	ndraising Representa	ative Leadership PAC Sponsor
8. Desig	nated Agent: Identify	by name, address (phone number - optional)		
	nated Agent: Identify	by name, address (phone number – optional)		
Ft		by name, address (phone number – optional)		
Ft	ull Name	by name, address (phone number – optional)		
Ft	ull Name	by name, address (phone number – optional)		
Fu	ull Name	CITY A	STATE A	ZIP CODE A
Fu	ull Name	CITY A	STATE A	ZIP CODE A
Fu	ull Name	CITY A		ZIP CODE A
9. Bank s	Iailing Address TITLE OR POSITION s or Other Depositoric	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	
9. Bank s	ull Name	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	
9. Banks safety Name	Iailing Address TITLE OR POSITION s or Other Depositoric	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	
9. Banks safety Name	lailing Address FITLE OR POSITION s or Other Depositorion deposit boxes or main	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	
9. Banks safety Name	lailing Address TITLE OR POSITION s or Other Depositorion deposit boxes or main e of Bank, sitory, etc.	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	
9. Banks safety Name	lailing Address TITLE OR POSITION s or Other Depositorion deposit boxes or main e of Bank, sitory, etc.	CITY CITY Telep es: List all banks or other depositories in which the	phone Number	