Image# 20240509964556650	64
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05/09/2024 06 : 39

PAGE 1 / 84 🗕

STATEMENT	OF
ORGANIZATI	ON

FEC FORM 1	STATEMEN ORGANIZA	_	Office L	PAGE 1 / 84
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	425 2ND STREET NE			
(Check if address is changed)				
			DC 20002 STATE ▲	
COMMITTEE'S E-MAIL ADDF	RESS			
(Check if address is changed)	kbroghamer@nrsc.org			
	Optional Second E-Mail Addr	ess		
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)			
2. DATE 01	09 / Y Y Y Y 2024			
3. FEC IDENTIFICATION I	NUMBER ► C COO	0027466		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined	this Statement and to the best o	f my knowledge and belief it is	s true, correct and corr	nplete.
Type or Print Name of Treasu	rer DAVIS, KEITH, , ,			
Signature of Treasurer DA	VIS, KEITH, , ,			09 / Y Y Y Y 2024
NOTE: Submission of false, erro	oneous, or incomplete information m ANY CHANGE IN INFORMATI	ay subject the person signing th ON SHOULD BE REPORTED V		lties of 52 U.S.C. §30109
Office Use Only		For further information con Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		C FORM 1 evised 06/2012)

FEC Form 1 (Revised 03/2022)	Page 2
5. 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 information below.)	e the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State
	District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee: (National, State REP (Democratic committee) (d) X This committee is a NAT or subordinate) committee of the REP Republic	atic, an, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	ected organization is a:
Corporation Corporation w/o Capital Stock	r Organization
Membership Organization Trade Association Coop	perative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	ated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid	PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
 Committees Participating in Joint Fundraiser
 2.

FEC Form 1 (Revise Write or Type Committee Na	,			Page 3
NRSC				
6. Name of Any Connecte	d Organization, Affiliated Committee, Joi	nt Fundraising Represent	ative, or Leadershi	p PAC Sponsor
Mailing Address	PO BOX 3743			
			46082	
	CITY 🔺	STAT	·F ▲ 7'	P CODE 🔺

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

DAVIS, K	ITH, , ,
Full Name	
Mailing Address	425 2ND STREET NE
	WASHINGTON DC 20002 - - -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
	Telephone number 202 675 6000

8. **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., assistant treasurer).

Full Name	DAVIS, KEITH, , ,
of Treasurer	
Mailing Address	425 2ND STREET NE
	WASHINGTON DC 20002
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
	Image: Telephone number 202 675 6000

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent	MARTIN, HEATHER, , ,	
Mailing Address	425 2ND STREET NE	
	WASHINGTON DC 20002	
	CITY A STATE A 2	
Title or Position	,	
ASSISTANT TRE	ASURER	6000 <u>6000</u>

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Mailing Address	8505 CENTENNIAL PKWY		
	LAS VEGAS	NV 89148	
	CITY A	STATE A	ZIP CODE ▲
Name of Bank, Depository,	etc.		
BB&T			
Mailing Address	1909 K STREET NW		
		DC 20006	
	CITY A	STATE A	ZIP CODE ▲

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

(3)	or (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
5.	Name of Any Connected	Organization, Affiliated Committee, Joint Fund	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 1159		
	Walling / Karooo			
				j 54903 j j
	Relationship:			
	Connecte	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponsor
3.	Designated Agent: Identif	y by name, address (phone number – optional)		
3.	Designated Agent: Identif	y by name, address (phone number – optional)		
3.		y by name, address (phone number - optional)		
3.	Full Name	y by name, address (phone number - optional)		
3.	Full Name	y by name, address (phone number - optional)		
3.	Full Name			<pre></pre>
3.	Full Name			<pre></pre>
3.	Full Name		STATE	<pre></pre>
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).	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or m Name of Bank,WELL	I I	elephone Number	
).	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or m Name of Bank, WELL Depository, etc.	List all banks or other depositories in which aintains funds.	elephone Number	
).	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or m Name of Bank,WELL	CITY ▲ CITY ▲ Te pries: List all banks or other depositories in which aintains funds. S FARGO	elephone Number	
).	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or m Name of Bank, WELL Depository, etc.	List all banks or other depositories in which aintains funds. S FARGO 1753 PINNACLE DRIVE 1753 PINNACLE DRIVE	elephone Number	

STATE 🔺

ZIP CODE

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

ZIP CODE

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
		FEC ID number	С
4.			0
Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 183		
J			
			54016
			54016
	CITY 🔺	STATE 🔺	ZIP CODE A
		Fundraising Represent	ative Leadership PAC Sp
Connecte Designated Agent: Identit	d Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
Connecter Designated Agent: Identif		Fundraising Represent	ative
Connecte Designated Agent: Identit		Fundraising Represent	ative Leadership PAC Sp
Connecter Designated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
Connecter Designated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
Connecter Designated Agent: Identif Full Name	y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
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Connecter Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional)	STATE	
Connecter Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or m	y by name, address (phone number – optional)	STATE	
Connecter Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or m Name of Bank, BANK Depository, etc	y by name, address (phone number – optional)	STATE	
Connecter Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or m Name of Bank, BANK	y by name, address (phone number – optional)	STATE	
Connecter Designated Agent: Identif Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or m Name of Bank, BANK Depository, etc	y by name, address (phone number – optional)	STATE	

STATE 🔺

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5(g) or (h).	Joint Fundraising	Participant:			
1.				FEC ID number	C
2.				FEC ID number	С
3.				FEC ID number	C
4.				FEC ID number	С
6. Name	of Any Connected O	rganization, Affiliated Committee, Jo	int Fundrais	ing Benresentativ	e or Leadershin PAC Sponsor
	TORY FOR ALASK				
Ν	Mailing Address	901 N WASHINGTON ST			
		STE 700			
		ALEXANDRIA		VA	22314
F	Relationship:	CITY A		STATE	
	Connected 0	Organization Affiliated Committee	× Joint Fu	ndraising Represent	ative Leadership PAC Sponsor
8. Design	nated Agent: Identify b	by name, address (phone number – op	otional)		
	nated Agent: Identify b	y name, address (pnone number - op	ptional)		
Ful	II Name	y name, address (pnone number - op	ptional)		
Ful		y name, address (pnone number - op	otional)		
Ful	II Name	y name, address (pnone number - op	otional)		
Ful	II Name		otional)		
Ful Ma	II Name				
Ful Ma	II Name			· · · · · · · · · · · · · · · · · · ·	
Ful Ma	II Name				<pre></pre>
Ful Ma TI 9. Banks	II Name			hone Number	
Ful Ma TI 9. Banks safety	II Name			hone Number	
Ful Ma 9. Banks safety Name	II Name			hone Number	
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Ful Ma TI 9. Banks safety Name Deposi	II Name	CITY ▲ CITY ▲ CITY ▲ CITY ▲		hone Number	

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
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	aising Representativ	e, or Leadership PAC Sponsor
BADLANDS VICTOR	RY COMMITTEE		
Mailing Address	P.O. BOX 26141		
			22313
Relationship:		STATE ▲	
Connecte	d Organization	Fundraising Represent	ative Leadership PAC Sponse
Designated Agent: Identif	y by name, address (phone number - optional)		
Full Name			
Full Name			
Mailing Address			
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Mailing Address	. ▼ Te	elephone Number	
Mailing Address	Te T	elephone Number	
Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or m	Te T	elephone Number	
Mailing Address TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or m Name of Bank, Depository, etc.	Pries: List all banks or other depositories in which aintains funds.	elephone Number	
Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or m Name of Bank, UNION	Image: Pries: List all banks or other depositories in which aintains funds. Image: NBANK & TRUST	elephone Number	
Mailing Address TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or m Name of Bank, Depository, etc.	Image: Pries: List all banks or other depositories in which aintains funds. Image: NBANK & TRUST	elephone Number	

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ZIP CODE

1.				FE	EC ID number	С			
2.				FE	EC ID number	С			
3.					EC ID number	С			
4.				 _	EC ID number	С			
-7									
Name of A	ny Connected C	Organization, Affil	liated Committee, Joint	t Fundraising	g Representativ	ve, or Le	eadershi	ip PAC	Sponso
O'DEA		IMITTEE							
Mailir	ng Address	2024 3RD AVE 1	N						
		STE 211							
		BIRMINGHAM				3	5203		
							71		
Relati	ionship:		CITY 🔺		STATE 🔺			P CODE	=
	Connected	Organization			STATE ▲		-		= ▲ PAC Spo
	Connected		Affiliated Committee				-		
Designated Full Na	Connected		Affiliated Committee				-		
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Designated Full Na Mailing	Connected	by name, address	Affiliated Committee						2AC Spo
Designated Full Na Mailing	Connected	by name, address	Affiliated Committee	onal)	raising Represent			lership F	2AC Spo

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

ZIP CODE

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2. FEC ID number 3. FEC ID number 4. FEC ID number 4. FEC ID number 6. FEC ID number 7. <td< th=""><th></th><th></th><th></th><th></th></td<>				
FEC ID number FEC ID number FEC ID number FEC ID number FEC ID number C C C C C C C D. BOX 50430 Mailing Address P.O. BOX 50430 Mailing Address P.O. BOX 50430 CITY A STATE A ZIP CODE A Connected Organization Affiliated Committee VITY A STATE A ZIP CODE A Ignated Agent: Identify by name, address (phone number – optional) Full Name	1.		FEC ID number	С
3	2.		FEC ID number	С
4. FEC ID number FEC ID number FEC ID number C Image: Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spons TEAM HAGERTY VICTORY Mailing Address P.O. BOX 50430 Mailing Address Victor A Structure Mailing Address Mailing Address Victor A Structure Mailing Address Mailing Address (pinter and pinter a			FEC ID number	С
Mailing Address P.O. BOX 50430 Mailing Address CITY A STATE A ZIP CODE A		· · · · · · · · · · · · · · · · · · ·	FEC ID number	С
TEAM HAGERTY VICTORY Mailing Address P.O. BOX 50430 Image: NaSHVILLE Image: NaSHVILLE </td <td>4.</td> <td></td> <td></td> <td></td>	4.			
TEAM HAGERTY VICTORY Mailing Address P.O. BOX 50430 Image: NaSHVILLE Image: NaSHVILLE </td <td>Name of Any Connected</td> <td>d Organization, Affiliated Committee, Joint Fund</td> <td>draising Representative</td> <td>e, or Leadership PAC Spons</td>	Name of Any Connected	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	-	• • •		-,
Mailing Address				
Mailing Address				
NASHVILLE NASHVILLE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spinated Agent: Identify by name, address (phone number – optional)	Mailing Address	P.O. BOX 50430		
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp ignated Agent: Identify by name, address (phone number – optional) Full Name	Maining Address			
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sp ignated Agent: Identify by name, address (phone number – optional) Full Name				27025
Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp ignated Agent: Identify by name, address (phone number – optional) Full Name				
ignated Agent: Identify by name, address (phone number - optional) Full Name	Relationship:	CITY 🔺	STATE 🔺	ZIP CODE A
	Designated Agent: Identi	ify by name, address (phone number – optional)		
		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)		
CITY ▲ STATE ▲ ZIP CODE ▲	Full Name	fy by name, address (phone number - optional)		
TITLE OR POSITION V	Full Name		└ · · · · · · · · · · · · · · · · · · ·	<pre></pre>
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Telephone Number =	Full Name Hailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or n Name of Bank, Depository, etc.	CITY ▲ CITY ▲ Ories: List all banks or other depositories in which naintains funds.	Telephone Number	
Telephone Number	Full Name Hailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or n Name of Bank, Depository, etc.	CITY ▲ C	Telephone Number	
Telephone Number =	Full Name Hailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or n Name of Bank, Depository, etc.		Telephone Number	s funds, holds accounts, rents

CITY

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

or (h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Sponsor
Mailing Address	P.O. BOX 31476		
	SAINT LOUIS	MO	63131
Relationship:		STATE A	
Connecte	ed Organization	t Fundraising Represent	ative Leadership PAC Sponsor
Designated Agent: Identi	fy by name, address (phone number – optional)		
Mailing Address			
			-
TITLE OR POSITION		STATE A	
		elephone Number	- -
Banks or Other Deposite			ts funds, holds accounts, rents
Banks or Other Deposite safety deposit boxes or m	ories: List all banks or other depositories in which		ts funds, holds accounts, rents
safety deposit boxes or m	ories: List all banks or other depositories in which		ts funds, holds accounts, rents
safety deposit boxes or m Name of Bank, CHAIN	ories: List all banks or other depositories in which laintains funds.		ts funds, holds accounts, rents
Name of Bank, CHAIN Depository, etc.	ories: List all banks or other depositories in which naintains funds.		ts funds, holds accounts, rents
Name of Bank, CHAIN Depository, etc.	ories: List all banks or other depositories in which naintains funds.		ts funds, holds accounts, rents

CITY

STATE **A**

ZIP CODE

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g) or (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)rganization Affiliat	ted Committee .I	oint Fundrai	sina Ben	resentativ	e or lea	dershin I	PAC Spc	nsor
	E BACK THE SEN				onig nop	ocontait	o, o: 204	a or or np		
Ν	lailing Address	P.O. BOX 9891								
						VA	222	19		
F	Relationship:		CITY A			STATE A		ZIP (CODE 🔺	
	ated Agent: Identify									
	iling Address	 								
TI	TLE OR POSITION V							ZIP CC		
				Tele	phone Nu	imber				
Banks safety o	or Other Depositorion	es: List all banks or ntains funds.	other depositorie	s in which th	e commit	ee deposi	ts funds, l	holds acc	ounts, re	nts
-										
Name (of Bank.									
	of Bank, tory, etc.									
Deposit										
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1. 💷 🗆					FEC ID	number	С				_
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Name of Any	Connected O	rganization, Aff	iliated Committee	, Joint Fundra	ising Repr	esentative	e, or Le	eadersh	ip PAC	C Spo	nso
										1 1	1
		P.O. BOX 9727	5								
Mailing	Address										
		RALEIGH					27	7624			
						STATE 🔺		Z			
Relatior	Connected		CITY A Affiliated Committe		Fundraising	Representa	ative	Lea	dership		Spoi
	Connected Congent: Identify b					Representa	ative	Lead			Spor
Designated A	Gent: Identify b		Affiliated Committee			Representa		Lead			Spor
Designated A Full Name	Gent: Identify b		Affiliated Committee			Representa	ative	Lea			Spor
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Designated A Full Name Mailing Ad	Connected (by name, addres	Affiliated Committee		Fundraising	Representa	ative				Spon
Designated A Full Name Mailing Ad	Connected Congent: Identify to a construct of the construction of	by name, addres	Affiliated Committees	- optional)	Fundraising		ative		dership		Spon

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	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 Commit	tee, Joint Fundraising F	Representativ	e, or Leadership PAC Sponsor
Mailing Address	P.O. BOX 590012			
	1			
	BIRMINGHAM		AL	35259
Relationship:	CITY 4		STATE A	
Connected	Organization Affiliated Com	nittee 🗙 Joint Fundrais	ing Depresent	ative Leadership PAC Spons
Designated Agent: Identify	by name, address (phone numb	er – optional)		
Designated Agent: Identify	by name, address (phone numb	er – optional)		
	by name, address (phone numb	er – optional)		
Full Name	by name, address (phone numb	er – optional)		
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5(g) or (h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
	COTTON MAJORITY	Organization, Affiliated Committee, Joint Fundra	Ising Representative	e, or Leadership PAC Sponsor
L				
L				
	Mailing Address	901 N WASHINGTON ST		
		STE 700		
		ALEXANDRIA		22314
	Relationship:		STATE ▲	
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	tive Leadership PAC Sponsor
8. De	signated Agent: Identify	by name, address (phone number - optional)		
8. De	signated Agent: Identify	by name, address (phone number - optional)		
8. De :		by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
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9. Ba saf	Full Name		ephone Number	
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5(g) or ((h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
_				
6. N	-	Organization, Affiliated Committee, Joint Fund	Iraising Representation	ve, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 9891		
	Relationship:		STATE	
	Connected	d Organization	nt Fundraising Represen	tative Leadership PAC Sponsor
_				
8. D	Designated Agent: Identify	y by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
			STATE A	
	TITLE OR POSITION		Folgen Number	_ _
			Telephone Number	
9. B				
	afety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	n the committee depos	its funds, holds accounts, rents
N	Banks or Other Depositor afety deposit boxes or ma lame of Bank, Depository, etc.	ries: List all banks or other depositories in which aintains funds.	n the committee depos	its funds, holds accounts, rents
N	afety deposit boxes or ma lame of Bank,	ries: List all banks or other depositories in which aintains funds.	n the committee depos	its funds, holds accounts, rents
N	afety deposit boxes or ma lame of Bank, Depository, etc.	ries: List all banks or other depositories in which aintains funds.	n the committee depos	its funds, holds accounts, rents
N	afety deposit boxes or ma lame of Bank, Depository, etc.	ries: List all banks or other depositories in which aintains funds.	n the committee depos	its funds, holds accounts, rents

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		Participant:													
1.							FEC	C ID r	number	С			_		
2.							FEC	C ID r	number	С					
3.							FEC	C ID r	number	С					
4.							FEC	C ID r	number	С					
Name of Any Co	onnected Org	ganization,	Affiliated	d Commi	ittee, Joi	nt Fund	raising I	Repre	esentativ	ve, or	Lead	ership	PAC	Spc	onso
TILLIS-NRS0		TEE	1 1												
Mailing Add	Iress	P.O. BOX 97	7275												
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		RALEIGH							NC	L	2762	4			
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Relationship	Connected O	-	_	CITY A ated Com one num	imittee	_	t Fundrai		Represent	tative		Leade			Spo
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3.							J	FEC	ID r	number	С	;					
4.							J	FEC	ID r	number	С	;			_		
	f Any Connected	-	, Affiliate	ed Comr	nittee, J	oint Fu	ndrais	ing R	epre	sentativ	ve, o	r Lea	ders	hip F	PAC	Spo	nso
	Scott Victory Fur	nd 															
Ма	ailing Address	P.O. BOX	9891				1 1	1 1	I	1 1 1	I	1 1		I		I	I
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	lationahin			CITY					S						J – L CODE		
Re	lationship:																
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Designat	Connected	_	-	iliated Co	mmittee			ndrais	ing F		ntative	9	Lea	aders	hip P		Spo
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5(g) or (h). Joint Fundraising	Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
	-	Drganization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
L		VICTORY 2022		
L				
	Mailing Address	P.O. BOX 9891		
				22219
	Relationship:		STATE ▲	
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	tive Leadership PAC Sponsor
8. De	signated Agent: Identify	by name, address (phone number – optional)		
8. De	signated Agent: Identify	by name, address (phone number – optional)		
8. De		by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
8. De :	Full Name		└	<pre></pre>
8. De	Full Name		L I I I I I I I I I I I I I I I I I I I	
8. De	Full Name			
9. Ba	Full Name	Image: Image	ephone Number	
9. Ba saf	Full Name Mailing Address TITLE OR POSITION T	Image: Image	ephone Number	
9. Ba saf Na	Full Name	Image: Image	ephone Number	
9. Ba saf Na	Full Name		ephone Number	
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5(g) or (h). Joint Fundraising	Participant:				
	1.			FEC I	D number	C
	2.			FEC I	D number	С
	3.			FEC I	D number	С
	4.			FEC I	D number	C
_						
6. N			ated Committee, Joint	Fundraising Re	presentative	e, or Leadership PAC Sponsor
	Mailing Address	1405 ASHLEY RIV	/ER RD			
		CHARLESTON			SC	29407
	Relationship:		CITY A		STATE A	ZIP CODE
	esignated Agent: Identify			Joint Fundraisir		ative Leadership PAC Sponsor
	Full Name					
	Mailing Address					
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	TITLE OR POSITION					
		V			STATE 🔺	ZIP CODE
		▼		Telephone 1		
sa		ies: List all banks c			lumber	∠IP CODE ▲
sa	anks or Other Depositor afety deposit boxes or mai ame of Bank, epository, etc.	ies: List all banks c			lumber	

1 FEC ID number 2. FEC ID number 3. FEC ID number 4. FEC ID number C FEC ID number A. FEC ID number A. FEC ID number A. FEC ID number C FEC ID number C FEC ID number C FEC ID number C FEC ID number Participation Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address 900 CIRCLE 75 Mailing Address 900 CIRCLE 75 Mailing Address 100 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number – optional) Full Name Halling Address Mailing Address CITY A STRTE A ZIP CODE A TITLE OR POSITION ▼ CITY A CITY A STATE A CITY A STATE A	g) or (h). Joint Fundrai	sing Participant:	
2.	1.		FEC ID number C
4. FEC ID number A. FEC ID number C PEC ID number PERSCHEL WALKER FOR GEORGIA VICTORY FUND Mailing Address 900 CIRCLE 75 STE 100 STE 100 ATLANTA GA ATLANTA GA Connected Organization Affiliated Committee Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name PEC ID N CITY A STATE A ZIP CODE A TITLE OR POSITION V CITY A	2.		FEC ID number C
**	3.		FEC ID number C
HERSCHEL WALKER FOR GEORGIA VICTORY FUND Mailing Address 900 CIRCLE 75 Mailing Address 900 CIRCLE 75 ATLANTA GA ATLANTA GA ATLANTA GA Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name	4.		FEC ID number
HERSCHEL WALKER FOR GEORGIA VICTORY FUND Mailing Address 900 CIRCLE 75 Mailing Address STE 100 ATLANTA GA 30339 ATLANTA GA 200 CIRCLE 75 Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee ✓ Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name			
Mailing Address 900 CIRCLE 75 Attlanta ATLANTA ATLANTA GA 30339 ATLANTA GA 30339 ATLANTA GA ATLANTA GA 30339 ATLANTA GA STATE A ZIP CODE A Designated Agent: Identify by name, address (phone number - optional) Full Name Mailing Address CITY A STATE A ZIP CODE A TITLE OR POSITION V CITY A STATE A ZIP CODE A	Name of Any Connected	ed Organization, Affiliated Committee, Joint Fund	raising Representative, or Leadership PAC Sponsor
Mailing Address STE 100 ATLANTA ATLANTA GA 30339 CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲ Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼			
Mailing Address STE 100 ATLANTA ATLANTA ATLANTA GA 30339 CITY ▲ STATE ▲ ZIP CODE ▲ Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲			
Mailing Address STE 100 ATLANTA ATLANTA ATLANTA GA 30339 CITY ▲ STATE ▲ ZIP CODE ▲ Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲		1 900 CIRCI E 75	
ATLANTA GA GA 30339 Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Besignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲ CITY ▲ STATE ▲ ZIP CODE ▲ CITY ▲ STATE ▲ ZIP CODE ▲ ZIP CODE ▲	Mailing Address		
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee ✓ Joint Fundraising Representative Leadership PAC Spo Designated Agent: Identify by name, address (phone number – optional) Full Name			
Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spont Designated Agent: Identify by name, address (phone number – optional) Full Name			
Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address Image: Citry ▲ STATE ▲ ZIP CODE ▲	Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
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Telephone Number	TITLE OR POSITIO	DN ▼ CITY ▲	STATE A ZIP CODE A
			elephone Number
	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.	-		
Name of Bank, Depository, etc.			
Name of Bank, Depository, etc.			STATE A ZIP CODE A

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i(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID numbe	er C
2.			FEC ID numbe	er C
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S. Name	of Any Connected O	rganization, Affiliated Committee, Joint Fundr	aising Representa	tive, or Leadership PAC Sponsor
Ν	lailing Address	50 S JONES BLVD #201		
		LAS VEGAS	NV	89107
F	Relationship:	CITY 🔺	STATE	▲ ZIP CODE ▲
	ated Agent: Identify b	y name, address (phone number – optional)		
	iling Address			
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safety o Name o	or Other Depositorie deposit boxes or main of Bank, tory, etc.	es: List all banks or other depositories in which tains funds.	the committee dep	osits funds, holds accounts, rents
	Mailing Address			

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5(g) or (h).	Joint Fundraising	Participant:			
1	1.		FEC	ID number	С
2	2		FEC	ID number	С
3	3.		FEC	ID number	С
4	4. 🔄 🖂 🖂 🖂		FEC	ID number	С
	ne of Any Connected O AXALT VICTORY FU	Prganization, Affiliated Committee, Joint Fur	ndraising R	epresentativ	e, or Leadership PAC Sponsor
	Mailing Address	50 S JONES BLVD #201			
				NV	89107
	Relationship:	CITY 🔺		STATE A	ZIP CODE
	ignated Agent: Identify	by name, address (phone number - optional)			
ľ	Mailing Address				
	TITLE OR POSITION	CITY A		STATE 🔺	ZIP CODE
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safet Nam	ks or Other Depositori ty deposit boxes or main ne of Bank, ository, etc.	es: List all banks or other depositories in white			s funds, holds accounts, rents

5(g) or (h). Joint Fundraisin	g Participant:			
	1.			FEC ID number	C
	2.			FEC ID number	С
	3.			FEC ID number	C
	4.			FEC ID number	С
	ame of Any Connected	Organization, Affil	iated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
					,
	Mailing Address	PO BOX 30844			
		BETHESDA		MD	20824
	Relationship:			STATE	
	Connected	d Organization	Affiliated Committee X Jo	int Fundraising Representa	_
	esignated Agent: Identify	, by name, address	(phone number – ontional)		
— 3. D	esignated Agent: Identify	/ by name, address	s (phone number - optional)		
— 3. D		/ by name, address	(phone number – optional)		
	Full Name	/ by name, address	(phone number - optional)		
. D	Full Name	/ by name, address	(phone number – optional)		
3. Do	Full Name		s (phone number – optional)		<pre></pre>
3. Do	Full Name				
	Full Name	· · · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
). B i Sa Ni	Full Name Mailing Address TITLE OR POSITION			Telephone Number	Image: Image
). B i Sa Ni	Full Name Mailing Address TITLE OR POSITION anks or Other Depositon afety deposit boxes or ma ame of Bank, epository, etc			Telephone Number	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

ZIP CODE

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5(g) d	or (h). Joint Fundrais	ing Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.	Name of Any Connecte	d Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	MASTERS VICTOR	Y COMMITTEE		
	Mailing Address	228 S WASHINGTON ST		
		STE 115		
	Deletienshine			
	Relationship:		STATE A	ZIP CODE 🔺
	Connect	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sponsor
			rundraioing hoprosonia	
8.	Designated Agent: Ident	ify by name, address (phone number - optional)		
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8.	Designated Agent: Ident			
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8.	Designated Agent: Ident	ify by name, address (phone number – optional)		
	Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional)		
8.	Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ify by name, address (phone number – optional)		L = L = L = L = L = L = L = L = L = L =
	Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or r Name of Bank, Depository, etc	ify by name, address (phone number – optional)		L = L = L = L = L = L = L = L = L = L =
	Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or r Name of Bank,	ify by name, address (phone number – optional)		L

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) or (h).	Joint Fundraising	g Participant:				
1.				FEC	ID number	С
2.				FEC	ID number	С
3.				FEC	ID number	С
4.				FEC	ID number	C
		Organization, Aff	iliated Committee, Joint	t Fundraising R	epresentativ	e, or Leadership PAC Sponsor
Ν	Mailing Address	PO BOX 1243				
		ALEXANDRIA		1		22313
F	Relationship:				STATE	
	Connected	Organization	Affiliated Committee	× Joint Fundrais	ing Poprocont	ative Leadership PAC Sponso
Desigr	nated Agent: Identify	by name, addres	s (phone number – optic	onal)		
	nated Agent: Identify	by name, addres	s (phone number – optic	onal)		
Ful		by name, addres	s (phone number – optic	onal)		
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Ful Ma	II Name	· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·
Ful Ma TI Banks safety Name	II Name		CITY ▲		Number	I I
Ful Ma TI Banks safety Name	II Name		CITY ▲		Number	
Ful Ma TI Banks safety Name Deposi	II Name		CITY ▲		Number	
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g) or (h).	Joint Fundraising	y 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, Affiliat	ed Committee, Joint	Fundraising I	Representativ	e, or Leaders	hip PAC Sponso
	D VICTORY 2022						
Ν	lailing Address	P.O. BOX 183					
Ĩ	Address						
						54016	
F	Relationship:				STATE ▲		= L ZIP CODE ▲
		Organization	-	Joint Fundrais			adership PAC Spon
			phone number – optior				
	iling Address						
IVIA	ning Address						
TI	TLE OR POSITION	↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓			STATE ▲	Z	
тг	TLE OR POSITION	↓		Telephone		Z	P CODE ▲
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Banks	or Other Depositor	ries: List all banks or	CITY A	-	Number		
Banks		ries: List all banks or		-	Number		
Banks safety o	or Other Depositor	ries: List all banks or	other depositories in v	-	Number	ts funds, hold	
Banks safety o Name o Deposit	or Other Depositor deposit boxes or ma of Bank,	ries: List all banks or	other depositories in v	which the com	Number	ts funds, hold	
Banks safety o Name o Deposit	or Other Depositor deposit boxes or ma of Bank, tory, etc.	ries: List all banks or	other depositories in v	which the com	Number	ts funds, hold	
Banks safety o Name o Deposit	or Other Depositor deposit boxes or ma of Bank, tory, etc.	ries: List all banks or	other depositories in v	which the com	Number	ts funds, hold	

5(g) or (h	n). Joint Fundraising	9 Participant:	_	
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6. N a	ame of Any Connected (Drganization, Affiliated Committee, Joint Fundra	aising Representative,	or Leadership PAC Sponsor
1	SMILEY VICTORY FL	IND		
L				
L				
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
				22314
	Relationship:	CITY A	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint	Fundraising Representati	ve Leadership PAC Sponsor
8. De	esignated Agent: Identify	by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
8. De		by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
8. De	Full Name			
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8. De	Full Name		I I I I I I I I I I I I I I I I I I I	
9. B a	Full Name	Image: Image	lephone Number	
9. Ba sa' Na	Full Name	Image: Image	lephone Number	
9. Ba sa' Na	Full Name	Image: Image	lephone Number	
9. Ba sa' Na	Full Name Mailing Address TITLE OR POSITION	Image: Image	lephone Number	
9. Ba sa' Na	Full Name Mailing Address TITLE OR POSITION	Image: Image	lephone Number	

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

	ising Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connec	ted Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	, 		
	1 228 S. WASHINGTON ST.		
Mailing Address	STE. 115		
			22314
Relationship:	CITY A	STATE 🔺	ZIP CODE
Conne	ected Organization	Fundraising Representa	ative
Full Name	entify by name, address (phone number – optional)		
Mailing Address			
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		L	
TITLE OR POSITI	ON V		
	ON V	STATE	
	ON ▼ T∈	elephone Number	
	ON ▼ Te Te sitories: List all banks or other depositories in which	elephone Number	
Banks or Other Deposisafety deposit boxes or	ON ▼ Te Te sitories: List all banks or other depositories in which	elephone Number	
Banks or Other Depos	ON ▼ Te Te sitories: List all banks or other depositories in which	elephone Number	
Banks or Other Deposisafety deposit boxes or Name of Bank,	ON ▼ Te Te sitories: List all banks or other depositories in which r maintains funds.	elephone Number	
Banks or Other Depos safety deposit boxes or Name of Bank, Depository, etc.	ON ▼ Te Te sitories: List all banks or other depositories in which r maintains funds.	elephone Number	

STATE **A**

ZIP CODE

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

	Fundraising Parti	cipant:			
1.			FEC II	D number	C
2.			FEC II	D number	С
3.			FEC II	D number	С
4.				D number	С
		zation, Affiliated Committee, Join	t Fundraising Re	oresentative	e, or Leadership PAC Sponsor
Mailing Ac	ldress	S. WASHINGTON ST.			
	STI	E. 115			
				VA	22314
Relationsh	ip:	CITY A	· · · · · · · · · · · · · · · · · · ·	STATE A	
	Connected Organ	ization Affiliated Committee	X Joint Fundraisin	g Representa	tive Leadership PAC Sponsor
Designated Age	ent: Identify by na	me, address (phone number – opti	onal)		
Designated Age	ent: Identify by na	me, address (phone number – opti	onal)		
		me, address (phone number – opti	onal)		
Full Name		me, address (phone number – opti-	onal)		
Full Name		me, address (phone number – opti-	onal)		
Full Name Mailing Addr	ess	me, address (phone number – opti-		 STATE ▲	
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Full Name Mailing Addr	ess				ZIP CODE ▲
Full Name Mailing Addr TITLE OR			Telephone N	umber	
Full Name Mailing Addr TITLE OR	ress ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓		Telephone N	umber	
Full Name Mailing Addr TITLE OR Banks or Other safety deposit b Name of Bank,	POSITION ▼		Telephone N	umber	
Full Name Mailing Addr TITLE OR Banks or Other safety deposit b Name of Bank, Depository, etc.	POSITION ▼		Telephone N	umber	

CITY

STATE **A**

ZIP CODE

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5(g) or (h). Joint Fundraising	Participant:		
	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
	ame of Any Connected C RUBIO VICTORY COI	Drganization, Affiliated Committee, Joint Fundrais	ing Representative, o	r Leadership PAC Sponsor
L				
L				
	Mailing Address	228 S WASHINGTON STREET SUITE 115		
				22314
	Relationship:	CITY 🔺	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint Fi	Indraising Representative	Leadership PAC Sponsor
8. De	signated Agent: Identify	by name, address (phone number – optional)		
8. De	Full Name	by name, address (phone number – optional)		
8. De		by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
8. De	Full Name			└
8. De	Full Name		STATE A	
9. Ba sat	Full Name Mailing Address TITLE OR POSITION Y		bhone Number	
9. Ba sat	Full Name		bhone Number	
9. Ba sat	Full Name Mailing Address TITLE OR POSITION Y Inks or Other Depositori fety deposit boxes or main ume of Bank,	CITY A CITY A Tele es: List all banks or other depositories in which the ntains funds.	ohone Number	
9. Ba sat	Full Name Mailing Address TITLE OR POSITION Inks or Other Depositori fety deposit boxes or main ume of Bank, epository, etc.	CITY A CITY A Tele es: List all banks or other depositories in which the ntains funds.	ohone Number	
9. Ba saf	Full Name Mailing Address TITLE OR POSITION Inks or Other Depositori fety deposit boxes or main ume of Bank, epository, etc.	CITY A CITY A Tele es: List all banks or other depositories in which the ntains funds.	ohone Number	

5(g) or (h).	Joint Fundraising	Participant:		
1.	. [FEC ID number	С
2			FEC ID number	C
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		Drganization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
20				
	Mailing Address	900 CIRCLE 75 PKWY SE		
		STE 100		
			GA	30339
	Relationship:		STATE ▲	
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	ative Leadership PAC Sponsor
8. Desig	gnated Agent: Identify	by name, address (phone number - optional)		
F	Full Name			
Ν	Mailing Address			
	TITLE OR POSITION		STATE A	ZIP CODE
L			phone Number	
	is or Other Depositori y deposit boxes or mai	es: List all banks or other depositories in which th ntains funds.	e committee deposit	s funds, holds accounts, rents

Name of Bank, Depository, etc.																								
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					С	ITY	′▲					S	TAT	Ε			7	ZIP	СС	DD	E 🔺	•		I

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5(g) or (h).	Joint Fundraising	Participant:		
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6. Nan	a of Any Connected (Drganization, Affiliated Committee, Joint Fundrais	sing Ponrosontativo	or Loadership BAC Sponsor
	RIENDS OF KENNE		any nepresentative	
L				
	Mailing Address	3337 NORTH HULLEN ST.		
		SUITE 301		
				70002
	Relationship:	CITY A	STATE A	
	Connected	Organization Affiliated Committee X Joint Fu	undraising Representa	tive Leadership PAC Sponsor
8. Des	ignated Agent: Identify	by name, address (phone number - optional)		
	ignated 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			
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9. Ban	Full Name		phone Number	
9. Ban safe	Full Name Mailing Address TITLE OR POSITION Mailing Address Ks or Other Depositori ty deposit boxes or mail		phone Number	
9. Ban safe Narr	Full Name		phone Number	
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9. Ban safe Narr	Full Name Mailing Address TITLE OR POSITION ks or Other Depositori ty deposit boxes or main ne of Bank, ository, etc.		phone Number	

5(g) or (h	n). Joint Fundraising	g Participant:		
	1.		FEC ID number	
	2.		FEC ID number C	
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6. N a	ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative, or	Leadership PAC Sponsor
I				
	Mailing Address	1327 H STREET		
	-	STE 101		
		LINCOLN		68508
	Relationship:		STATE	
	Connected	Organization Affiliated Committee X Joint	Fundraising Representative	Leadership PAC Sponsor
8. De	esignated Agent: Identify	by name, address (phone number - optional)		
8. D e	Full Name	by name, address (phone number - optional)		
8. De		by name, address (phone number – optional)		
8. De	Full Name	by name, address (phone number – optional)		
8. De	Full Name	by name, address (phone number – optional)		
8. D e	Full Name			
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9. B a	Full Name		ephone Number	
9. Ba sa Na	Full Name Mailing Address TITLE OR POSITION		ephone Number	
9. Ba sa Na	Full Name		ephone Number	
9. Ba sa Na	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or ma ame of Bank, epository, etc		ephone Number	
9. Ba sa Na	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or ma ame of Bank, epository, etc		ephone Number	

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5(g) or ((h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
6. N	lame of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
		-		
	Mailing Address	2024 3RD AVE N		
		STE 211		
				35203
	Relationship:		STATE A	ZIP CODE
	Connected	d Organization	Fundraising Representa	tive Leadership PAC Sponsor
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8. D	esignated Agent: Identify	v by name, address (phone number - optional)		
8. D	Pesignated Agent: Identify	v by name, address (phone number – optional)		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

ZIP CODE

STATE 🔺

5(g) d	or(h). Joint Fundraisir	ıg 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, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115		
				22314
	Relationship:		STATE A	
	Connecte	d Organization	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identif	y by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
				· · · · · · · · · · · · · · · · · · ·
		CITY ▲		
	TITLE OR POSITION		lephone Number	_ _
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which a aintains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.			
	Mailing Address			

1.				FEC ID num	nber	C
2.				FEC ID num	nber	C
з. 🗌				FEC ID num	nber	C
4.				FEC ID num	nber	C
Name c	of Any Connected C	Organization, Affiliated	l Committee, Joint Fun	draising Represe	ntative,	or Leadership PAC Sponso
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M	ailing Address		VE SE		1 1 1	
	<u> </u>	NUM 131				
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				int Fundraising Rep		ve Leadership PAC Spo
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(g) or (h).	Joint Fundraising	Participant:					
1.				FEC	D ID number	С	
2.				FEC	D ID number	С	
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	of Any Connected C		ated Committee, Joint	Fundraising	Representativ	e, or Leadership PAC S	oonsor
	Mailing Address	PO BOX 93441					
		DES MOINES			IA	50393	
	Relationship:		CITY 🔺		STATE A	ZIP CODE /	•
	nated Agent: Identify	by name, address	(phone number – optio	nal)			
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		FEC	ID number	С
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Name of Any Connected	Drganization, Affiliated Committee, Joint	Fundraising R	epresentativ	e, or Leadership PAC Sponsor
	RITY			
Mailing Address	228 S WASHINGTON ST			
	ALEXANDRIA	1		22314
Relationship:	CITY A		STATE	
Connected	Organization Affiliated Committee	× Joint Fundrais	ing Represent	ative Leadership PAC Spons
Designated Agent: Identify	by name, address (phone number - optic	onal)		
Designated Agent: Identify Full Name	by name, address (phone number - optic	onal)		
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1	g) or (h).	Joint Fundraising	Participant:		
2.	1.			FEC ID number	С
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RICKETTS SHEEHY VICTORY COMMITTEE Mailing Address 228 S WASHINGTON ST LALEXANDRIA VA 22314 ALEXANDRIA VA 22314 Connected Organization Atfiliated Committee Joint Fundraising Representative Leadership PAC Spons Connected Organization Atfiliated Committee Joint Fundraising Representative Leadership PAC Spons Mailing Address	4.			FEC ID number	С
RICKETTS SHEEHY VICTORY COMMITTEE Mailing Address 228 S WASHINGTON ST LALEXANDRIA VA 22314 ALEXANDRIA VA 22314 ALEXANDRIA VA 22314 Connected Organization Atfiliated Committee Joint Fundraising Representative Leadership PAC Spons Designated Agent: Identify by name, address (phone number – optional) Full Name	News	of Anna Opennostad (-in a Denne and the	n an Landarshin DAO Oranaan
Mailing Address 228 S WASHINGTON ST Mailing Address STE 115 ALEXANDRIA VA ALEXANDRIA VA ALEXANDRIA VA Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Mailing Address				sing Representativ	e, or Leadership PAC Sponsor
Mailing Address STE 115 ALEXANDRIA VA 22314 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address Image: CITY ▲ STATE ▲ ZIP CODE ▲ Mailing Address Image: CITY ▲ STATE ▲ ZIP CODE ▲ Mailing Address Image: CITY ▲ STATE ▲ ZIP CODE ▲ Image: CITY ▲ STATE ▲ ZIP CODE ▲ Image: CITY ▲ STATE ▲ ZIP CODE ▲ Image: CITY ▲ STATE ▲ ZIP CODE ▲ Image: CITY ▲ STATE ▲ ZIP CODE ▲ Image: CITY ▲ STATE ▲ ZIP CODE ▲ Image: CITY ▲ STATE ▲ ZIP CODE ▲ Image: CITY ▲ STATE ▲ ZIP CODE ▲ Image: CITY ▲ STATE ▲ ZIP CODE ▲ Image: CITY					
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Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spons Designated Agent: Identify by name, address (phone number – optional) Identify and the second sec			STE 115		
Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.					
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Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	Fu	II Name	by name, address (phone number - optional)		
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			iliated Committe	e, Joint Fund	draising R	epresentativ	e, or L	eadersh	ip PAC	Sponso
Mailing A	ddress	228 S WASHIN	GTON ST							
Maining /	aarooo	STE 115								
						VA	2	22314		
						STATE A			IP COD	
Relations	hin					STALL A		2		
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5(g) or (h).	Joint Fundraising	Participant:			
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	ne of Any Connected O AXALT VICTORY FU	Prganization, Affiliated Committee, Joint Fur	ndraising R	epresentativ	e, or Leadership PAC Sponsor
	Mailing Address	50 S JONES BLVD #201			
				NV	89107
	Relationship:	CITY 🔺		STATE A	ZIP CODE
	ignated Agent: Identify	by name, address (phone number - optional)			
ľ	Mailing Address				
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safet Nam	ks or Other Depositorie ty deposit boxes or main ne of Bank, ository, etc.	es: List all banks or other depositories in white			s funds, holds accounts, rents

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(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
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		rganization, Affiliated Committee, Joint Fundrais	sing Representativ	ve, or Leadership PAC Sponsor
SUL		2020		
N	lailing Address	901 N WASHINGTON ST, SUITE 700		
R	elationship:	CITY A		
	Connected (Organization Affiliated Committee X Joint Fu	Indraising Represen	tative Leadership PAC Sponsor
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	deposit boxes or main	es: List all banks or other depositories in which the ntains funds.	e committee depos	its funds, noids accounts, rents
Name o	of Bank, tory, etc.			
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

		J Participant:			
1.			FEC	ID number	C
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Name	of Any Connected	Drganization, Affiliated Committee, Joint F	undraising F	lepresentativ	e, or Leadership PAC Sponsor
TE.	AM MITT				
	Mailing Address	C/O RED CURVE SOLUTIONS			
	J	138 CONANT STREET, 2ND FLOOR			
			· · · · I	MA	01915
	Relationship:	CITY A	<u> </u>	STATE A	
	Connected	Organization Affiliated Committee X	Joint Fundrais	ing Represent	ative Leadership PAC Sponsor
Desidi	nated Agent: Identify	by name address (phone number - option;	al)		
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5(g) or (h).	Joint Fundraising	Participant:			
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6. Nam	ne of Any Connected (Drganization. Affiliated	Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponsor
	ORNYN MAJORITY	-			,
	Mailing Address	228 S. WASHINGTON	STREET		
		SUITE 115			
		ALEXANDRIA			22314
	Relationship:			STATE	
	Connected	Organization Affilia	ted Committee 🗙 Joir	nt Fundraising Representa	ative Leadership PAC Sponsor
8. Desi	gnated Agent: Identify	by name, address (pho	ne number – optional)		
	gnated Agent: Identify	by name, address (pho	ne number – optional)		
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(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
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. Name	of Any Connected C	Organization, Affiliated Committee, Joint Fundrai	sing Representativ	e, or Leadership PAC Sponsor
SU				
I	Mailing Address	228 S WASHINGTON STREET SUITE 115		
			VA	22314
I	Relationship:	CITY A	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint F	undraising Represent	ative Leadership PAC Sponsor
. Desigi	nated Agent: Identify	by name, address (phone number – optional)		
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			state A	
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g) or (h).	Joint Fundraising	Participant:					
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Name	of Any Connected O	rganization Affil	iated Committee, Joint	Fundraising R	onresentativ	e or Leadersh	in PAC Sponsor
	JNE VICTORY CO				oprocentativ		
Ν	Address	PO BOX 9891					
		ARLINGTON			VA	22219	
F	elationship:		CITY 🔺		STATE A	ZI	P CODE
	Connected	Organization	Affiliated Committee	Joint Fundrais	ing Represent	ative Lead	dership PAC Sponso
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Banks		es: List all banks	CITY CITY or other depositories in v		Number		
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(g) or (h).	Joint Fundraising	Participant:				
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			Committee, Joint Fu	Indraising R	epresentativ	e, or Leadership PAC Sponsor
CO		ΓΕΧΑS				
ſ	Mailing Address	228 S WASHINGTON	STREET SUITE 115			
				1		
F	Relationship:				STATE A	ZIP CODE A
	Connected	Drganization Affilia	ted Committee	Joint Fundrais	ing Represent	ative
Desigr	nated Agent: Identify I	by name, address (pho	ne number – optional)		
	nated Agent: Identify I	by name, address (pho	ne number – optional)		
Fu	II Name	y name, address (pho	ne number – optional)		
Fu		by name, address (pho	ne number - optional)		
Fu	II Name	by name, address (pho	ne number — optional)		
Fu	II Name		ne number - optional)		
Fu	II Name) 		· · · · · · · · · · · · · · · · · · ·
Fu	II Name					· · · · · · · · · · · · · · · · · · ·
Fu Ma TI Banks	II Name	 List all banks or ot 			Number	
Fu Ma TI Banks safety	II Name	 List all banks or ot 			Number	
Fu Ma Ti Banks safety Name	II Name	 List all banks or ot 			Number	
Fu Ma TI Banks safety Name Deposi	II Name	 List all banks or ot 			Number	
Fu Ma TI Banks safety Name Deposi	II Name	 List all banks or ot 			Number	
Fu Ma TI Banks safety Name Deposi	II Name	 List all banks or ot 			Number	

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5(g) or (h).	Joint Fundraising	Participant:		
	1		FEC ID number	
:	2.		FEC ID number	
;	3.		FEC ID number	
	4.		FEC ID number)
6. Nan	ne of Any Connected O	rganization, Affiliated Committee, Joint Fundrais	sing Representative, o	r Leadership PAC Sponsor
G		FUND		
L				
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
				22314
	Relationship:	CITY 🔺	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint Fi	undraising Representative	e Leadership PAC Sponsor
8. Des	ignated Agent: Identify I	by name, address (phone number - optional)		
	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			<pre></pre>
	Full Name			· · · · · · · · · · · · · · · · · · ·
9. Ban safe	Full Name Mailing Address TITLE OR POSITION hts or Other Depositorie ety deposit boxes or main		bhone Number	
9. Ban safe Nam	Full Name		bhone Number	
9. Ban safe Narr	Full Name	CITY A CITY Tele Es: List all banks or other depositories in which the that ins funds.	bhone Number	
9. Ban safe Narr	Full Name	CITY A CITY Tele Es: List all banks or other depositories in which the that ins funds.	bhone Number	
9. Ban safe Nam	Full Name	CITY A CITY Tele Es: List all banks or other depositories in which the that ins funds.	bhone Number	

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5(g) or (h).	Joint Fundraising	Participant:		
-	1.		FEC ID number	
	2		FEC ID number	
:	3. 🔄 🖂 🖂		FEC ID number C	
2	4. 🔄 🖂 🖂 🖂		FEC ID number	
	-	-	raising Representative, or Leadership PAC Spo	onsor
		20		
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
	Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲	
	Connected	Organization Affiliated Committee X Join	t Fundraising Representative Leadership PAC	Sponsor
8. Des	ignated Agent: Identify	by name, address (phone number - optional)		
	ignated 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			
	Full Name			
9. Ban	Full Name			
9. Ban safe Narr	Full Name		elephone Number	
9. Ban safe Narr	Full Name	CITY A	elephone Number	
9. Ban safe Narr	Full Name	CITY A	elephone Number	
9. Ban safe Narr	Full Name	CITY A	elephone Number	

(g) or (h).	oonit i anaraising	Participant:		
1	1		FEC ID number	С
2	2.		FEC ID number	С
3	3. 🕒		FEC ID number	C
2	4. 🔄 🖂 🖂 🖂		FEC ID number	C
Nam	ne of Any Connected C	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
C				
	Mailing Address	901 N WASHINGTON STREET		
	Mailing Address	SUITE 700		
	Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
		by name, address (phone number – optional)		
	ignated Agent: Identify Full Name	by name, address (phone number - optional)		
I		by name, address (phone number - optional)		
I	Full Name	by name, address (phone number - optional)		
I	Full Name	by name, address (phone number - optional)		
I	Full Name		└ · · · · · · · · · · · · · · · · · · ·	
I	Full Name		L I I I I I I I I I I I I I I I I I I I	
I	Full Name			ZIP CODE
Ban safet	Full Name	CITY ▲ CITY ▲ Tele Es: List all banks or other depositories in which th	ephone Number	
Ban safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositori ty deposit boxes or main ne of Bank, ository, etc.	CITY ▲ CITY ▲ Tele Es: List all banks or other depositories in which th	ephone Number	
Ban safet	Full Name	CITY ▲ CITY ▲ Tele Es: List all banks or other depositories in which th	ephone Number	
Ban safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositori ty deposit boxes or main ne of Bank, ository, etc.	CITY ▲ CITY ▲ Tele Es: List all banks or other depositories in which th	ephone Number	
Ban safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositori ty deposit boxes or main ne of Bank, ository, etc.	CITY ▲ CITY ▲ Tele Es: List all banks or other depositories in which th	ephone Number	

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2(9)01	(h). Joint Fundraising	g Participant:			
	1.			FEC ID number	C
	2.			FEC ID number	C
	3.			FEC ID number	C
	4.			FEC ID number	С
-					
6. I	CO-PILOT COMMITT	Organization, Affiliated Committee, Joint F FF	undraisi	ng Representativo	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 2969			
		FARMINGTON HILLS			48333
	Relationship:	CITY A		STATE A	
	Connected	Organization Affiliated Committee	Joint Fun	draising Represent	ative
8. C	Designated Agent: Identify	by name, address (phone number - optional	al)		
	Full Name				
		1			
	Full Name				
	Mailing Address				
	Mailing Address				<pre></pre>
	Mailing Address			· · · · · · · · · · · · · · · · · · ·	
s	Mailing Address TITLE OR POSITION TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or ma Name of Bank,	▼ ies: List all banks or other depositories in w		none Number	
s	Mailing Address TITLE OR POSITION	▼ ies: List all banks or other depositories in w		none Number	
s	Mailing Address TITLE OR POSITION TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or ma Name of Bank,	▼ ies: List all banks or other depositories in w		none Number	
s	Mailing Address TITLE OR POSITION TITLE OR POSITION Banks or Other Depositor Banks or Other Depositor Bank, Depository, etc.	▼ ies: List all banks or other depositories in w		none Number	
s	Mailing Address TITLE OR POSITION TITLE OR POSITION Banks or Other Depositor Banks or Other Depositor Bank, Depository, etc.	▼ ies: List all banks or other depositories in w		none Number	

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5(g) or (h	h). Joint Fundraising	g Participant:	-	
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6. N a		Organization, Affiliated Committee, Joint Fundra OINT FUNDRAISING COMMITTEE	ising Representative,	or Leadership PAC Sponsor
	Mailing Address			
		BEVERLY	MA	01915
	Relationship:		STATE A	ZIP CODE 🔺
	Connected	l Organization	Fundraising Representat	ive Leadership PAC Sponsor
8. De	esignated Agent: Identify	v by name, address (phone number - optional)		
	Full Name			
	Full Name			
	· · · ·			
	· · · ·			
	Mailing Address		└	
	· · · ·	•		
	Mailing Address	•	STATE	
	Mailing Address	Tele ries: List all banks or other depositories in which the	ephone Number	
	Mailing Address	Tele ries: List all banks or other depositories in which the	ephone Number	
sa Na	Mailing Address	ries: List all banks or other depositories in which the intains funds.	ephone Number	funds, holds accounts, rents
sa Na	Mailing Address TITLE OR POSITION TITLE OR POSITION Title of Bank,	ries: List all banks or other depositories in which the intains funds.	ephone Number	funds, holds accounts, rents
sa Na	Mailing Address TITLE OR POSITION Anks or Other Depositor Anks or Bank, Pepository, etc.	ries: List all banks or other depositories in which the intains funds.	ephone Number	funds, holds accounts, rents
sa Na	Mailing Address TITLE OR POSITION Anks or Other Depositor Anks or Bank, Pepository, etc.	ries: List all banks or other depositories in which the intains funds.	ephone Number	funds, holds accounts, rents

1								
1.			FEC	ID number	С		_	_
2.			FEC	ID number	С			
3.			FEC	ID number	С			I
4.			FEC	ID number	С			Ţ
lame of Any Connected (Organization, Affi	iliated Committee, Joint	Fundraising R	epresentative	e, or Lead	ership P/	AC Spons	301
TIM SCOTT'S AMERI	CAN OPPORTI	JNITY						
Mailing Address	1405 ASHLEY I	RIVER ROAD						
	CHARLESTON		1	SC	2940)7		
Relationship:		CITY 🔺		STATE 🔺		ZIP CO	DDE 🔺	
	Organization by name, addres	Affiliated Committee	X Joint Fundrais		ative		DDE ▲ p PAC Sp	on
Connected		Affiliated Committee						on
Connected Designated Agent: Identify		Affiliated Committee						on
Connected		Affiliated Committee			ative			oon
Connected		Affiliated Committee			ative			
Connected	by name, addres	Affiliated Committee			ative		p PAC Sp	on
Connected	by name, addres	Affiliated Committee		ng Representa		Leadershi	p PAC Sp	

5(g) c	or (h). Joint Fundraisi	ng Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	С
6.	Name of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON ST		
		SUITE 115		
				22314
	Relationship:	CITY 🔺	STATE A	ZIP CODE
	Connecte	ed Organization	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identi	fy by name, address (phone number - optional)		
8.		fy by name, address (phone number - optional)		
8.	Full Name	fy by name, address (phone number - optional)		
8.	Full Name	fy by name, address (phone number - optional)		
8.	Full Name			
8.	Full Name		I I I I I I I I I I I I I I I I I I I	· · · · · · · · · · · · · · · · · · ·
8. 9.	Full Name Mailing Address TITLE OR POSITION		elephone Number	
	Full Name Mailing Address TITLE OR POSITION		elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or m Name of Bank,		elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.		elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.		elephone Number	

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.			FEC ID number	С
4.			FEC ID number	C
Name	of Any Connected (Drganization, Affiliated Committee, Joint Fundr	aising Representativ	ve, or Leadership PAC Sponsor
NR				
I	Mailing Address	228 S WASHINGTON STREET #115		
		1		
		ALEXANDRIA		22314
I	Relationship:			
	Connected	Organization Affiliated Committee X Joint	Fundraising Represen	tative Leadership PAC Sponso
		by name, address (phone number - optional)		
Fu	III Name	by name, address (phone number - optional)		
Fu		by name, address (phone number - optional)		
Fu	III Name	by name, address (phone number - optional)		
Fu	III Name	by name, address (phone number - optional)		
Fu	III Name			
Fu	III Name		I I I I I I I I I I I I I I I I I I I	
Fu	III Name			
Fu Ma T Banks	III Name		elephone Number	
Fu Ma T Banks safety Name	ailing Address		elephone Number	its funds, holds accounts, rents
Fu Ma T Banks safety Name	III Name		the committee depos	its funds, holds accounts, rents
Fu Ma T Banks safety Name	ailing Address		the committee depos	its funds, holds accounts, rents
Fu Ma T Banks safety Name	III Name		the committee depos	its funds, holds accounts, rents

CITY

STATE **A**

ZIP CODE

1. FEC ID number C 2. FEC ID number C 3. FEC ID number C 4. FEC ID number C Mailing Address 228 S. WASHINGTON STREET FEC ID number Mailing Address 228 S. WASHINGTON STREET FEC ID number	;pons
2.	;pons
4 FEC ID number C	;pons
4. FEC ID number C Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S HAWLEY VICTORY COMMITTEE Mailing Address 228 S. WASHINGTON STREET	\$pons
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC s HAWLEY VICTORY COMMITTEE HAWLEY VICTORY COMMITTEE	ipons
HAWLEY VICTORY COMMITTEE HAWLEY VI	Spons
Mailing Address 228 S. WASHINGTON STREET	
Mailing Address	
Mailing Address	
Mailing Address	
SUITE 115	
ALEXANDRIA VA 22314 -	
Relationship: CITY ▲ STATE ▲ ZIP CODE	
Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership P	C Sp
Full Name	
Mailing Address	
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE A	•
Telephone Number	

1.						FEC ID	number	С				
2.						FEC ID	number	С				
3.						FEC ID	number	С				
4.						FEC ID	number	С				
Name of Any C	Connected O	rganization, A	filiated Con	nmittee, Join	nt Fundrai	ising Rep	resentative	e, or Le	adersh	ip PAC	Spon	sor
WICKER VI		OMMITTEE					1 1 1		1 1	1 1	1 1	
Mailing Ac	ddress	228 S WASH		ET SUITE 11	5 							
			A				VA		2314	-		
Relationsh	nip:		CIT	Y 🔺			STATE A		Z			
	Connected (Organization	Affiliated C	Committee	× Joint F	undraising	Representa	ative	Lea	dership	PAC S	oons
Designated Age	ent: Identify t	by name, addre	ess (phone n	umber – opti	onal)							
Designated Age	ent: Identify t	by name, addro	ess (phone n	umber – opti	onal)							
		by name, addro	ess (phone n	umber – opti	ional)							
Full Name		by name, addro	ess (phone n	umber – opti	ional)							
Full Name		by name, addro	ess (phone n	umber – opti	ional)					· · ·		
Full Name Mailing Add	ress		ess (phone n		ional)							
Full Name Mailing Add TITLE OR	ress POSITION V					L						

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

g) or (h).	Joint Fundraising	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 O	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
		Y COMMITTEE		
N	lailing Address			
		STE. 115		
			VA	22314
R	elationship:		STATE	
	Connected 0	Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sponsor
_	Name	by name, address (phone number – optional)		
Mai	iling Address			
		1		
			STATE A	
TIT	TLE OR POSITION V			
			lephone Number	
Banks safety c	or Other Depositorie deposit boxes or main	es: List all banks or other depositories in which t ntains funds.	the committee deposit	s funds, holds accounts, rents
Name o	of Bank			
	ory, etc.			
I	Mailing Address			

CITY

STATE **A**

ZIP CODE

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) or (h).	Joint Fundraising	Participant:				
1.				FEC	ID number	С
2.				FEC	ID number	С
з. 🛛				FEC	ID number	С
4.				FEC	ID number	С
Name o	of Any Connected C	Organization, Aff	iliated Committee, Joint	Fundraising R	epresentativ	e, or Leadership PAC Sponsor
MIK						
M	lailing Address	PO BOX 183				
		HUDSON		1	WI	54016
R	elationship:		CITY A		STATE A	
	Connected	Organization	Affiliated Committee	Joint Fundrais	ina Represent	ative Leadership PAC Sponso
Full	Name					
	Name					
Mai	ling Address					<pre></pre>
Mai		· · · · · · · · · · · · · · · · · · ·				
Mai	ling Address	<pre></pre>		Telephone		· · · · · · · · · · · · · · · · · · ·
Mai TIT Banks	Iing Address	ies: List all banks			Number	
Mai	Iing Address	ies: List all banks			Number	
Mai	Iing Address	ies: List all banks			Number	
Mai TIT Banks safety c Name c Deposit	Iing Address	ies: List all banks			Number	
Mai TIT Banks safety c Name c Deposit	Iing Address	ies: List all banks			Number	
Mai TIT Banks safety c Name c Deposit	Iing Address	ies: List all banks			Number	

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
6. Name	a of Any Connected O	organization, Affiliated Committee, Joint Fundra	icing Poprocontative	or Londorship BAC Spansor
	ONDAY MEETING P	-		
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115		
				22314
	Relationship:		STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	tive Leadership PAC Sponsor
8. Desig	gnated Agent: Identify	by name, address (phone number – optional)		
	ull Name	by name, address (phone number – optional)		
F		by name, address (phone number - optional)		
F	ull Name	by name, address (phone number - optional)		
F	ull Name	by name, address (phone number - optional)		
F	ull Name		└	
F	ull Name <u> </u>		STATE	· · · · · · · · · · · · · · · · · · ·
F M - - 9. Bank	ull Name		ephone Number	
F M 9. Bank safety Name	ull Name		ephone Number	
F M 9. Bank safety Name	Address		ephone Number	
F M 9. Bank safety Name	ull Name 1ailing Address TITLE OR POSITION s or Other Depositorie / deposit boxes or mair e of Bank,		ephone Number	
F M 9. Bank safety Name	Address		ephone Number	

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5(g) or (h).	Joint Fundraising	Participant:		
	1		FEC ID number	
:	2.		FEC ID number	
;	3.		FEC ID number	
	4.		FEC ID number)
6. Nan	ne of Any Connected O	rganization, Affiliated Committee, Joint Fundrais	sing Representative, o	r Leadership PAC Sponsor
G		FUND		
L				
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
				22314
	Relationship:	CITY 🔺	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint Fi	undraising Representative	e Leadership PAC Sponsor
8. Des	ignated Agent: Identify I	by name, address (phone number - optional)		
	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			<pre></pre>
	Full Name			
9. Ban safe	Full Name Mailing Address TITLE OR POSITION hts or Other Depositorie ety deposit boxes or main		bhone Number	
9. Ban safe Nam	Full Name		bhone Number	
9. Ban safe Narr	Full Name	CITY A CITY Tele Es: List all banks or other depositories in which the that ins funds.	bhone Number	
9. Ban safe Narr	Full Name	CITY A CITY Tele Es: List all banks or other depositories in which the that ins funds.	bhone Number	
9. Ban safe Nam	Full Name	CITY A CITY Tele Es: List all banks or other depositories in which the that ins funds.	bhone Number	

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, Affi	iliated Committee, Join	t Fundraising F	Representativ	e, or Lead	dership	PAC Spor	ns
TEAN	I RAND								
Mai	iling Address	PO BOX 190							
		NEWPORT		1	KY	4107	72	_ _	1
							ZIP (-
		Organization		X Joint Fundrais	sing Represent	ative	Leaders	hip PAC S) -
Designat	Connected ed Agent: Identify		Affiliated Committee		sing Represent	ative	Leaders	hip PAC S	
Designat Full N	Connected ed Agent: Identify Name				sing Represent	ative	Leaders	hip PAC S	
Designat Full N	Connected ed Agent: Identify				sing Represent	ative	Leaders	hip PAC S	
Designat Full N	Connected ed Agent: Identify Name				sing Represent	ative	Leaders	hip PAC S	
Designat Full N	Connected ed Agent: Identify Name		s (phone number – optic			ative			
Designat Full N Mailir	Connected ed Agent: Identify Name	by name, addres			sing Represent	ative	Leaders		

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5(g) or	r(h). Joint Fundraising	Participant:				
	1.			FEC II) number	С
	2.			J FEC II) number	C
	3.			FEC II) number	С
	4.			J FEC II) number	C
6.	Name of Any Connected	Organization, Affiliated Co	ommittee, Joint Fu	ndraising Re	presentative	, or Leadership PAC Sponsor
	Mailing Address	PO BOX 9891				
					VA	22219
	Relationship:	C	ITY 🔺		STATE A	
	Connected	Organization Affiliated	Committee X J	oint Fundraising	g Representa	tive Leadership PAC Sponsor
8. I	Designated Agent: Identify	by name, address (phone	number – optional)			
	Mailing Address					
	Mailing Address					
	Mailing Address					
	Mailing Address TITLE OR POSITION		· · · · · · · · ·			
			·····································	Telephone N		
: 	TITLE OR POSITION	ies: List all banks or other		Telephone N	umber	$I = \begin{bmatrix} 1 & 1 & 1 & 1 \\ 1 & 1 & 1 & 1 \\ 2 & 1 & 1 & 1 \\ 2 & 1 & 2 & 1 \\ 2 & 1 & 2 & 2 \\ 2 & 2 & 2 & 2 \\ 2 & 2 & 2 & 2$
: 	TITLE OR POSITION	ies: List all banks or other		Telephone N	umber	
: 	TITLE OR POSITION	ies: List all banks or other		Telephone N	umber	
: 	TITLE OR POSITION	ies: List all banks or other		Telephone N	umber	
: 	TITLE OR POSITION	ies: List all banks or other ntains funds.		Telephone N ich the commi	umber	

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1. 🗋				FEC	CID number	С		
2.				FEC	C ID number	С		
3.				FEC	C ID number	С		
4.				FEC	C ID number	С		
Name o	f Any Connected	Organization, Aff	iliated Committee, Join	t Fundraising	Representativ	e, or Leade	ership PAC	Sponso
TEAN								
Ma	ailing Address	PO BOX 93441						
					IA	50393		
_	lationship:		CITY A		STATE A		ZIP COL	
Re								
		Organization by name, addres	Affiliated Committee	X Joint Fundra	ising Represent	ative L	_eadership	PAC Spor
Designa					ising Represent	ative L	_eadership	PAC Spor
Designa Full	ted Agent: Identify				ising Represent	ative L	_eadership	PAC Spor
Designa Full	ted Agent: Identify				ising Representa	ative L	_eadership	PAC Spor
Designa Full	ted Agent: Identify				ising Representa	ative L	_eadership	PAC Spor
Designa Full Maili	ted Agent: Identify Name	by name, addres			ising Representa		_eadership	
Designa Full Maili	ted Agent: Identify Name ng Address _E OR POSITION	by name, addres	s (phone number – opti	onal)				

	undraising Partici	pant:			
1.			FEC	D number	C
2.			FEC	D number	С
3.			FEC	D number	C
4.			FEC	D number	С
-	-		nt Fundraising Re	epresentativo	e, or Leadership PAC Sponsor
		′ FUND			
Mailing Add	Iress	. WASHINGTON ST.			
	STE.	115			
			1	VA	22314
Relationship	o:	CITY 🔺		STATE A	
	Connected Organiza	_	X Joint Fundraisi	ng Representa	ative Leadership PAC Sponsor
3. Designated Ager	nt: Identify by name	e, address (phone number – op	tional)		
Full Name					
Mailing Addre	ess				
Mailing Addre	ess				
Mailing Addre					
Mailing Addre		CITY ▲		STATE	
			Telephone		
TITLE OR F Banks or Other safety deposit bo Name of Bank,	POSITION ▼	all banks or other depositories		Number	
TITLE OR F Banks or Other safety deposit bo Name of Bank, Depository, etc.	POSITION ▼ Depositories: List xes or maintains fu	all banks or other depositories		Number	
TITLE OR F Banks or Other safety deposit bo Name of Bank,	POSITION ▼ Depositories: List xes or maintains fu	all banks or other depositories		Number	
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5(g) or (h). Joint Fundraising	Participant:		
	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
	ame of Any Connected C RUBIO VICTORY COI	Drganization, Affiliated Committee, Joint Fundrais	ing Representative, o	r Leadership PAC Sponsor
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L				
	Mailing Address	228 S WASHINGTON STREET SUITE 115		
				22314
	Relationship:	CITY 🔺	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint Fi	Indraising Representative	Leadership PAC Sponsor
8. De	signated Agent: Identify	by name, address (phone number – optional)		
8. De	Full Name	by name, address (phone number – optional)		
8. De		by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
8. De	Full Name	by name, address (phone number - optional)		
8. De	Full Name			└
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9. Ba sat	Full Name Mailing Address TITLE OR POSITION Y		bhone Number	
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9. Ba sat	Full Name Mailing Address TITLE OR POSITION Inks or Other Depositori fety deposit boxes or main ume of Bank, epository, etc.	CITY A CITY A Tele es: List all banks or other depositories in which the ntains funds.	ohone Number	
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			filiated Committee, Joi	nt Fundraisin	g Represent	ative, or L	eadership	PAC Sponso
BLACKBL								
Mailing	Address	PO BOX 3241						
		BRENTWOOD)				37024	-
Relation	nship:		CITY A		STATI		ZIP (
	Connected		Affiliated Committee	X Joint Fund	Iraising Repre	sentative		hip PAC Spon
	gent: Identify I		Affiliated Committee ss (phone number – op		draising Repre			
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2.				FEC ID number	С	
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Name of Any Connected	Organization,	Affiliated Committee,	Joint Fundrais	sing Representativ	e, or Leadersh	ip PAC Sponsor
	COMMITTEE					
		026				
Mailing Address	PO BOX 13					
				NC	78711	
Relationship:		CITY A		STATE	Z	IP CODE
Connecte	d Organization	Affiliated Committee) X Joint Fi	Indraising Represen	tative Lea	dership PAC Spons
Full Name						
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5(g) or (h)	. Joint Fundraising	g Participant:		
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	no of Any Connected (Overside Affiliated Committee Isint Funder	ioina Donacontotiu	an Loodorshin DAC Channer
		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 9891		
		ARLINGTON		22219
	Relationship:	CITY A	STATE A	
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8. Des	signated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Full Name			
	Mailing Address			
		•	STATE	· · · · · · · · · · · · · · · · · · ·
	Mailing Address	▼ Tel	ephone Number	
9. Ba n	Mailing Address	Tel ies: List all banks or other depositories in which the second secon	ephone Number	
9. Ban safe Nan	Mailing Address	Tel	ephone Number	s funds, holds accounts, rents
9. Ban safe Nan	Mailing Address	Tel	ephone Number	s funds, holds accounts, rents
9. Ban safe Nan	Mailing Address	Tel	ephone Number	s funds, holds accounts, rents
9. Ban safe Nan	Mailing Address	Tel	ephone Number	s funds, holds accounts, rents

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

ZIP CODE

STATE **A**

) or (h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Sponsor
	228 S. WASHINGTON STREET		
Mailing Address			
	SUITE 115		
			22314
Relationship:		STATE 🔺	ZIP CODE
Connected	d Organization	EFundraising Represent	ative Leadership PAC Spons
Connected		E Fundraising Representa	ative Leadership PAC Spons
Designated Agent: Identify	d Organization	E Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identify	d Organization	E Fundraising Represent	ative Leadership PAC Spons
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Connected Connected Designated Agent: Identify Full Name Mailing Address	Affiliated Committee Solution Affiliated Committee Joint		
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Connected Connec	d Organization Affiliated Committee X Joint y by name, address (phone number – optional) ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓	STATE A	
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5(g) or (h). Joint Fundraising	Participant:			
	1.			FEC ID number	С
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6. Na	me of Any Connected	Organization, Affiliated Con	nmittee, Joint Fundra	sing Representat	ive, or Leadership PAC Sponsor
	BANKS VICTORY FU	ND			
L					
	Mailing Address	PO BOX 30844			
				MD	
	Relationship:	Cl	ΓY ▲	STATE /	
	Connected	Organization Affiliated	Committee 🗙 Joint F	undraising Represe	ntative Leadership PAC Sponsor
8. De :	signated Agent: Identity	by name, address (phone r	iumber – optional)		
	Full Name				
	Full Name	1			
	<u> </u>				
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	Mailing Address				
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	Mailing Address				
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5(g) or (h).	Joint Fundraising	Participant:	
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6. Nan	ne of Any Connected C	Organization, Affiliated Committee, Joint Fundr	aising Representative, or Leadership PAC Sponsor
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	Mailing Address	228 S. WASHINGTON ST.	
		STE. 115	
			VA 22314
	Relationship:	CITY A	STATE A ZIP CODE A
	Connected	Organization Affiliated Committee X Joint	Fundraising Representative Leadership PAC Sponso
	terrate de la constant de la contra		
8. Des	Ignated Agent: Identity	by name, address (phone number – optional)	
	Full Name		
	Full Name		
9. Ban	Full Name		
9. Ban safe	Full Name		elephone Number
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Name of Any Connected Organization		FEC ID number	C C C
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4 AA	on, Affiliated Committee, Joint F	FEC ID number	C
Name of Any Connected Organization	on, Affiliated Committee, Joint F	_	
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NRSC TARGETED STATE VIC Image: state	TORY	undraising Representat	ive, or Leadership PAC Sponsor
Mailing Address 228 S. W			
Mailing Address	ASHINGTON STREET		
Mailing Address	ASHINGTON STREET		
SUITE 1			
	15		
	DRIA	VA	22314
Relationship:		STATE /	
Connected Organizatio	n Affiliated Committee X	Joint Fundraising Represe	ntative Leadership PAC Spons
Full Name			
Mailing Address			
TITLE OR POSITION V	CITY A	STATE A	ZIP CODE
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	ng Participant:		
1.		FEC ID number	С
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Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representativ	e, or Leadership PAC Sponsor
Mailing Address			
	STE 115		
		VA	22314
		L STATE ▲	
Relationship:			
Connecte		Fundraising Represent	ative Leadership PAC Spons
Connecte	d Organization		ative Leadership PAC Spons
Connecte Designated Agent: Identif	d Organization		ative Leadership PAC Spons
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		int:			
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Name of Any Co	nnected Organizati	on, Affiliated Committee, Join	t Fundraising Re	presentativ	ve, or Leadership PAC Sponso
TED CRUZ V	ICTORY FUND				
Mailing Addr	ess PO BO	< 25376 			
	HOUST	ON	1	TX	77265
					ZIP CODE
	Connected Organization		X Joint Fundraisi	STATE ▲	
	Connected Organization				
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g) or (h).	Joint Fundraising	g Participant:							
1.					FEC ID	number	С		
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Name o	of Any Connected (Organization, A	ffiliated Committee	ə, Joint Fundra	ising Repr	esentative	, or Leade	ership PAC	Sponsor
Μ	lailing Address	228 S WASHI		JITE 115					
		ALEXANDRIA	X		1	VA	22314		
R	elationship:		CITY 🔺						DE 🔺
	Connected	Organization	Affiliated Commit	tee 🗙 Joint f	undraising	Representa	tive	eadership	PAC Sponso
Full	Name								
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5(g) or (h)	Joint Fundraising	Participant:		
	1.		FEC ID number	C
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	-	Drganization, Affiliated Committee, Joint Fu	ndraising Representativ	re, or Leadership PAC Sponsor
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	Mailing Address	101 W ARGONNE DR		
		#24		
			MO	63122
	Relationship:	CITY A	STATE 🔺	ZIP CODE
8. Des		Organization Affiliated Committee X.	loint Fundraising Represen	tative Leadership PAC Sponsor
	Full Name			
	Mailing Address			
	TITLE OR POSITION		STATE A	ZIP CODE
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	nks or Other Depositori ety deposit boxes or main	es: List all banks or other depositories in wh ntains funds.	ich the committee depos	its funds, holds accounts, rents
	me of Bank, pository, etc.			
	Mailing Address			
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	aising Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Conner	ted Organization, Affiliated Committee, Joint Fundra	aising Benresentative	or Leadershin PAC Sponsor
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Mailing Address	3275 NORTH FORT APACHE ROAD		
			89129
Relationship:	CITY ▲	STATE ▲	
Conn	ected Organization	Fundraising Representa	tive Leadership PAC Sponsor
Designated Agent: Ide	entify by name, address (phone number - optional)		
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TITLE OR POSIT			
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Mailir	ng Address	421 OFFICE		DR												I	
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	ionship: Connected d Agent: Identify	Organization by name, add	_	CIT iliated C hone nu	ommitt		_	Fundra	ising	Represer	ntative	e	Le	aders	hip P	AC S	Spor
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	1		FEC ID number	С
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6. N a	ome of Any Connected	Organization, Affiliated Committee, Joint Fundrai	aing Depresentativ	ar Loodorphin DAC Spansor
0. 14		ADERSHIP COUNCIL COMMITTEE	sing nepresentative	e, or Leadership FAC Sponsor
	Mailing Address	421 OFFICE PARK DR		
		MOUNTAIN BROOK		35223
	Relationship:		STATE ▲	
	Connected	d Organization	undraising Representa	ative Leadership PAC Sponsor
8. De	esignated Agent: Identify	v by name, address (phone number - optional)		
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9. B a	Full Name Mailing Address TITLE OR POSITION		phone Number	
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9. B a sa	Full Name Mailing Address TITLE OR POSITION		phone Number	s funds, holds accounts, rents
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з. L				FEC	ID number	C
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Name o	of Any Connected	Organization, Affil	iated Committee, Joint	Fundraising R	lepresentativ	e, or Leadership PAC Sponsor
TEA						
Mi	ailing Address	PO BOX 23537				
		PITTSBURGH		1	PA	15222
					STATE ▲	
Re	elationship:					
	Connected	Organization by name, address		✓ Joint Fundraisnal)	ing Represent	tative Leadership PAC Spon
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(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
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Name	of Any Connected O	rganization, Affiliated Committee, Joint Fundrais	sing Representativ	e, or Leadership PAC Sponsor
Γ	Address	901 N WASHINGTON ST, STE 700		
			VA	22314
F	Relationship:		STATE A	ZIP CODE
Desigr	ated Agent: Identify I	by name, address (phone number - optional)		
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Name of Any Connected C	Organization, Affiliated Committe	e, Joint Fundraising R	epresentativ	e, or Leadership PAC Sponsor
Mailing Address	421 OFFICE PARK DR			
			AL	35223
Relationship:	CITY 🔺		STATE A	ZIP CODE
Designated Agent: Identify	by name, address (phone number	· – optional)		
Mailing Address	<u> </u>			
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		Telephone		
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