**FEC** 

Only

# STATEMENT OF

PAGE 1 / 17 •

**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Team Herschel, Inc C/O 1302 BELLEVUE AVE ADDRESS (number and street) STE B (Check if address is changed) **DUBLIN** 31021 GΑ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address salpurpura2010@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.teamherschel.com (Check if address is changed) DATE 2024 C00787853 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Purpura, Salvatore, , Mr., Purpura, Salvatore, , Mr., Date 05 07 2024 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

EC Form 1 (Revised 03/2022)	Page <b>2</b>
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
Name of Candidate Walker, Herschel, , Mr.,	
Candidate Party Affiliation  REP  Office Sought: House  X Senate President	State GA  District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republication	atic, an, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	cted organization is a:
Corporation Corporation w/o Capital Stock Labor	r Organization
Membership Organization Trade Association Coope	erative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation 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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Committees Participating in Joint Fundraiser	
1	

I	FEC Form 1 (Revised 0	)2/2009)		Page <b>3</b>
٧	Vrite or Type Committee Name			
	Team Herschel,			
6.	-	rganization, Affiliated Committee, Joint Fur	ndraising Representat	tive, or Leadership PAC Sponsor
	2022 Founders Com	mittee 		
	Mailing Address	1305 W 11th St, #213		
		1		
		HOUSTON		77008
		CITY ▲	STATE	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X	Joint Fundraising Repre	sentative Leadership PAC Sponso
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number optiona	al) and position of the pe	erson in possession of committee
	PURPURA	., SALVATORE, , Mr.,		
	Full Name			
	Mailing Address	478 STIRLING BRIDGE DR		
		1		
		ORMOND BEACH	, , , ,   FL	32174
		CITY ▲	STATE	ZIP CODE ▲
	Title or Position ▼	5.1.1 =	01/112	211 0002 -
	TREASURER		Telephone number	704 668 1993
8.	any designated agent (e.g.,	d address (phone number optional) of the assistant treasurer).	treasurer of the comm	ittee; and the name and address of
	Full Name PURPURA of Treasurer	., SALVATORE, , Mr.,		
	Mailing Address	478 STIRLING BRIDGE DR		
		ORMOND BEACH		32174
		CITY ▲	STATE	ZIP CODE ▲
	Title or Position ▼	5 =	SIAIL	2.7 0002 —
	TREASURER		Telephone number	704 668 1993

FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent Mailing Address	PASSANTINO, STEFAN, , MR,  ELECTIONS LLC  1000 MAIN AVE SW, 4TH FL  WASHINGTON	DC DC	20024
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
ATTORNEY-IN-FA	ACT Telephone r	number 2	02   -   400   -   1530
	<b>Depositories:</b> List all banks or other depositories in which the commes or maintains funds.	nittee deposits f	unds, holds accounts, rents
Name of Bank, De	epository, etc.		
Mailing Address	BANK OF AMERICA  600 N WASHINGTON ST  ALEXANDRIA		22314
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, De	epository, etc. Bank of Nevada		
Mailing Address	8505 Centennial Parkway		
-			
	Las Vegas	NV	89149
	CITY ▲	STATE ▲	ZIP CODE ▲

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

Page \_\_\_ **of** \_\_\_\_\_

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spon
2022 GEORGIA VIC	TORY COMMITTEE		
Mailing Address	900 CIRCLE 75 PKWY SE		
	STE 100		
	ATLANTA	GA	30339
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited defety deposit boxes or maintain the state of the s	CITY A	STATE A Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or main and the property of the property of the position of Bank, repository, etc.	CITY ▲  cries: List all banks or other depositories in whi aintains funds.  BRIDGE BANK	STATE A Telephone Number	

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

Page of <sup>17</sup>

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. I	-	Organization, Affiliated Committee, Joint Fundra	ising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	901 N WASHINGTON ST, STE 700		
	Dalationalia	ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sponsor
8. [	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
		1		
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
		Tel	ephone Number	
?	safety deposit boxes or main	es: List all banks or other depositories in which that intains funds.  FIRST BANK  300 GALLERIA PARKWAY SE	he committee deposi	ts funds, holds accounts, rents
	•	STE 100		
	-	STE 100  ATLANTA	GA	30339

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

Page \_\_\_ **of** \_\_\_\_

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 Com	nmittee, Joint Fundi	raising Representativ	ve, or Leadership PAC Spons
CORNYN VICTORY	COMMITTEE			
Mailing Address	PO Box 13026			
	Austin		TX	78711
Relationship:	CIT	Y <b>▲</b>	STATE A	ZIP CODE ▲
	d Organization Affiliated C		Fundraising Represent	tative Leadership PAC Sp
			Fundraising Represent	tative Leadersnip PAC Sp
Designated Agent: Identif			Fundraising Represent	tative Leadersnip PAC Sp
Pesignated Agent: Identif			Fundraising Represent	tative Leadersnip PAC Sp
Pesignated Agent: Identif	y by name, address (phone no	umber – optional)		
Pesignated Agent: Identif	y by name, address (phone no	umber – optional)	Fundraising Represent	ZIP CODE A

Page	of	17	
raue	UI		

1				FEC II	D number	C	
2				FEC II	D number	С	
3				FEC II	D number	C	
4				FEC II	D number	С	
Name of	f Any Connected	Organization, A	ffiliated Committee, Joint	Fundraising Re	presentative	e, or Leadershi	p PAC Spons
GA V	ICTORY						
Ма	ailing Address	900 CIRCLE 7	75 PKWY SE				
		STE 100					
		ATLANTA			GA	30339	
			CITY A		STATE A	ZIF	CODE A
		Organization  by name, addre		Joint Fundraisin		ative Leade	ership PAC Sp
)esignat	Connected		Affiliated Committee			ative Leade	ership PAC Spo
<b>Designat</b> Full 1	Connected ted Agent: Identify		Affiliated Committee			Leade	ership PAC Spo
<b>Designat</b> Full 1	Connected ted Agent: Identify		Affiliated Committee			ative Leade	ership PAC Spo
esignat	Connected ted Agent: Identify		Affiliated Committee			ative Leade	ership PAC Spo
Pesignat Full N Mailir	Connected ted Agent: Identify	by name, addre	Affiliated Committee				ership PAC Spo

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

Page of <sup>17</sup>

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
		Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
N	Mailing Address	900 CIRCLE 75 STE 100		
		ATLANTA	ı GA ı	30339
F	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected		undraising Represent	
8 Design	nated Agent: Identify	hy name address (phone number – ontional)		
Ful	II Name	by name, address (phone number – optional)		
Ful		by name, address (phone number – optional)		
Ful	II Name	by name, address (phone number – optional)		
Ful	II Name			
Ful Ma	II Name	CITY	STATE A	ZIP CODE A
Ful Ma	Il Name	CITY A	STATE A	ZIP CODE A
Ful Ma	II Name	CITY   Telep  Tes: List all banks or other depositories in which the	phone Number	
9. Banks safety Name Deposi	II Name	CITY   Telep  Tes: List all banks or other depositories in which the	phone Number	
9. Banks safety Name Deposi	Il Name	CITY   Telep  Tes: List all banks or other depositories in which the	phone Number	
9. Banks safety Name Deposi	Il Name	CITY   Telep  Tes: List all banks or other depositories in which the	phone Number	

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

Page \_\_\_ **of** \_\_\_\_\_

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2. 💄			FEC ID number	С
3. 🗆			FEC ID number	С
4			FEC ID number	C
6. <b>Name o</b>	of Any Connected O	rganization, Affiliated Committee, Joint Fundrai	ising Representative	e. or Leadership PAC Sponsor
	-	TORY COMMITTEE		· · · · · · · · · · · · · · · · · · ·
M	ailing Address	PO BOX 751271		
		LAS VEGAS	NV NV	89136
R	elationship:	CITY A	STATE ▲	ZIP CODE ▲
8. <b>Designa</b>	Connected of Conne	Organization Affiliated Committee X Joint F	Fundraising Representa	Leadership PAC Sponsor
Full	Name			
Mai	ling Address			
TIT	LE OR POSITION V	CITY ▲	STATE ▲	ZIP CODE ▲
			ephone Number	
	leposit boxes or main of Bank,	es: List all banks or other depositories in which the tains funds.		1
		1		ı
•	∕lailing Address			
	Mailing Address			

Dogo	of	17	
Page	ot		

ganization, Affiliated Committee, Joi TY  228 S WASHINGTON ST  STE 115  ALEXANDRIA  CITY   ganization	FEC II	VA	C C C , or Leadership PAC Spon
228 S WASHINGTON ST  STE 115  ALEXANDRIA  CITY	FEC II	D number  D number  presentative	C C , or Leadership PAC Spon
228 S WASHINGTON ST  STE 115  ALEXANDRIA  CITY	FEC II	presentative	, or Leadership PAC Spon
228 S WASHINGTON ST  STE 115  ALEXANDRIA  CITY		presentative	, or Leadership PAC Spon
228 S WASHINGTON ST  STE 115  ALEXANDRIA  CITY	int Fundraising Re	VA	
228 S WASHINGTON ST  STE 115  ALEXANDRIA  CITY			22315
STE 115  ALEXANDRIA  CITY			22315
STE 115  ALEXANDRIA  CITY			22315
ALEXANDRIA  CITY			22315
CITY A			22315
		CTATE A	
ganization Affiliated Committee	_	STATE A	ZIP CODE ▲
CITY ▲		STATE ▲	ZIP CODE ▲
	Telephone N	lumber	
	CITY A  CITY A  List all banks or other depositories ains funds.	Telephone N  List all banks or other depositories in which the commit	CITY ▲ STATE ▲  Telephone Number  List all banks or other depositories in which the committee deposits ains funds.

Page	of <sup>17</sup>	

	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spons
Schmitt Walker Geo	rgia Victory Fund 2022		
Mailing Address	626C Admiral Drive, Suite 321		
	Annapolis	ı ı MD ı	, 21401
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
rielationship.	CITY	SIAIE	ZIP CODE A
Connect  Designated Agent: Ident	ed Organization Affiliated Committee X	Joint Fundraising Represent	
Pesignated Agent: Ident			
Designated Agent: Ident			Leadership PAC Spo
Pesignated Agent: Ident			
Pesignated Agent: Ident	ify by name, address (phone number – optiona		
Pesignated Agent: Ident	ify by name, address (phone number – optiona		ZIP CODE A
Pesignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optiona		
Pesignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional distribution).	STATE A	
Pesignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit	ify by name, address (phone number – optional content of the cont	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposition  afety deposit boxes or necessity.	ify by name, address (phone number – optional content of the cont	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit	ories: List all banks or other depositories in what intains funds.	STATE   Telephone Number  hich the committee deposi	ZIP CODE A
Pesignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposition  Identificate to the property of the property of the position	ories: List all banks or other depositories in what intains funds.	STATE   Telephone Number  hich the committee deposi	ZIP CODE A
Pesignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit  afety deposit boxes or not be a position, etc.	ories: List all banks or other depositories in whaintains funds.	STATE   Telephone Number  hich the committee deposi	ZIP CODE A
Pesignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit  afety deposit boxes or not be a position, etc.	ories: List all banks or other depositories in whaintains funds.	STATE   Telephone Number  hich the committee deposi	ZIP CODE A

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

Page of <sup>17</sup>

(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
. Name	of Any Connected O	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
TAH	KE BACK THE SEN	IATE		
N	Mailing Address	PO BOX 9891		1 1 1 1 1 1 1 1 1 1 1 1
		ARLINGTON	, , VA ,	22219
F	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Represent	ative Leadership PAC Sponso
	nated Agent: Identify	by name, address (phone number – optional)		
Ful		by name, address (phone number – optional)		
Ful	II Name	by name, address (phone number – optional)		
Ful	II Name	by name, address (phone number – optional)		
Ful Ma	II Name	CITY A	STATE A	ZIP CODE A
Ful Ma	II Name	CITY A	STATE A	ZIP CODE A
TI  Banks safety Name	II Nameailing Address  ITLE OR POSITION   or Other Depositoric deposit boxes or mair of Bank,	CITY A  Tele  es: List all banks or other depositories in which the	ephone Number	
Full Ma	II Nameailing Address  ITLE OR POSITION To or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY A  Tele  es: List all banks or other depositories in which the	ephone Number	
Full Ma	II Nameailing Address  ITLE OR POSITION   or Other Depositoric deposit boxes or mair of Bank,	CITY A  Tele  es: List all banks or other depositories in which the	ephone Number	
Full Ma	II Nameailing Address  ITLE OR POSITION To or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY A  Tele  es: List all banks or other depositories in which the	ephone Number	
Full Ma	II Nameailing Address  ITLE OR POSITION To or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY A  Tele  es: List all banks or other depositories in which the	ephone Number	

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

Page \_\_\_\_ **of** \_\_\_\_\_

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2. 🗆			FEC ID number	С
3. 🗆			FEC ID number	С
4			FEC ID number	C
	-	rganization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
M	ailing Address	PO BOX 501707		
IVI	annig Address	I		
		ATLANTA	GA	31150
R	elationship:	CITY A	STATE A	ZIP CODE ▲
	Connected (	Organization Affiliated Committee X Joint F	- - - - - - - - - - - - - - - - - - -	ative Leadership PAC Sponsor
	nated Agent: Identify I	oy name, address (phone number - optional)		
Full		oy name, address (phone number – optional)		
Full	Name	oy name, address (phone number – optional)		
Full	Name	oy name, address (phone number – optional)		
Full Mai	Name	CITY	STATE A	ZIP CODE A
Full Mai	Name	CITY A	STATE A	ZIP CODE A
Full Mai	Name In Ingland Address  TLE OR POSITION To Company The Ingland Address or Main Ingland Address or Mai	CITY   CITY   Tele  Ses: List all banks or other depositories in which the	ephone Number	s funds, holds accounts, rents
9. Banks safety of Deposite	Name In Ingland Address  TLE OR POSITION To Company The Ingland Address or Main Ingland Address or Mai	CITY A  Tele  Ses: List all banks or other depositories in which the trains funds.	ephone Number	s funds, holds accounts, rents
9. Banks safety of Deposite	Name In Ingliance Address  TLE OR POSITION   or Other Depositoric leposit boxes or main of Bank, bry, etc.	CITY A  Tele  Ses: List all banks or other depositories in which the trains funds.	ephone Number	s funds, holds accounts, rents

	_	17	
Page	of		

	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	l Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Sponso
-	S PEOPLE'S CHAMPION COMMITTEE		
Mailing Address	900 CIRCLE 75		
	SUITE 100		
	ATLANTA	GA L	30339
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number – optional)		
Designated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name   _   _   Mailing Address  TITLE OR POSITION	CITY A	STATE   Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank,	CITY ▲  pries: List all banks or other depositories in which aintains funds.	Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank,	CITY A  city A  pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A  city A  pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rents

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

Page \_\_\_ **of** \_\_\_\_

ganization, Affiliated Committee, Joint Fund ATE REPUBLICAN NOMINEE FUND 2 PO BOX 9891  ARLINGTON		
PO BOX 9891  ARLINGTON	FEC ID number  FEC ID number  draising Representative	C C E, or Leadership PAC Spons
PO BOX 9891  ARLINGTON	rec ID number	C e, or Leadership PAC Spons
PO BOX 9891  ARLINGTON	draising Representative	e, or Leadership PAC Spons
PO BOX 9891  ARLINGTON	022	
ARLINGTON		
ARLINGTON	VA	20040
ARLINGTON		00040
		00040
	VA	00040
CITY ▲		22219
	STATE ▲	ZIP CODE ▲
CITY A	STATE ▲	ZIP CODE ▲
	Telephone Number	
	y name, address (phone number – optional)  CITY	y name, address (phone number – optional)  CITY   STATE

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

Page \_\_\_ **of** \_\_\_\_

1.					
			FEC ID num	ber C	
2.			FEC ID num	ber C	
3.			FEC ID num	ber C	
4.			FEC ID num	ber C	
Name of Any Connec	cted Organization, Af	filiated Committee, Joint	Fundraising Represen	tative, or Leadersh	nip PAC Spons
WALKER GRAH	AM MAJORITY FUN	<b>ND</b> 			
Mailing Address	228 S WASHIN	NGTON ST.			
	STE. 115				
	ALEXANDRIA	1 1 1 1 1 1 1 1		A <sub> </sub> 22314	1 1
Relationship:		CITY A	STAT		 ZIP CODE ▲
riolationip.			SIAI		IF CODE A
Full Name					
Mailing Address	1				
Mailing Address					
Mailing Address					
		CITY A	STATE		CODE A
TITLE OR POSIT	l	CITY A	STATE Telephone Number		CODE A