Image# 201803149096555615				DAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4 —
			(	Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
GOP Winning W				
ADDRESS (number and street)	228 S. Washington St.			
(Check if address is changed)	Ste. 115			
	Alexandria └ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │		VA 22 STATE ▲	2314 [
COMMITTEE'S E-MAIL ADDRI	_SS _llisker@hdafec.com			
	Optional Second E-Mail Ad	dress		
<ul> <li>(Check if address is changed)</li> </ul>				
	4 / Y Y Y Y 2018			
3. FEC IDENTIFICATION N	UMBER ► C c	00673319		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined t	this Statement and to the best	of my knowledge and belief	it is true, correct an	d complete
Type or Print Name of Treasure	er Lisker, Lisa, , ,			
Signature of Treasurer	er, Lisa, , ,	[Electronically Filed]	Date 03	/ D D / Y Y Y Y 14 2018
NOTE: Submission of false, error		may subject the person signing		e penalties of 2 U.S.C. §437g
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
TYP	PE OF C	OMMITTEE	
Cai	ndidate	e 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. (Com information below.)	plete the candidate
	ne of Ididate		
	ididate ty Affiliati	on Office Sought: House Senate President	State
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Par	rty Con	nmittee:	
(d)			(Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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.)	
Joir	nt Fund	Iraising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	MCSALLY FOR SENATE INC.	666040
	2.	COMSTOCK FOR CONGRESS	554261
	3.	ELISE FOR CONGRESS	547893
	4.	FEC ID number	

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Write or Type Committee Name

## **GOP** Winning Women

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address										
	CITY		STATE	ZIP CODE						
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor										

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

Lisker, Lis	a, , ,
Full Name	
Mailing Address	228 S. Washington St.
	Ste. 115
	Alexandria         VA         22314           Image: Image in the im
Title or Position	CITY STATE ZIP CODE
Treasurer	703     549     7705       Telephone number     1     1

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 of Treasurer	Lisker, Lisa, , ,
Mailing Address	228 S. Washington St.
	Ste. 115
	Alexandria
	CITY STATE ZIP CODE
Title or Position	

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Full Name of Designated Agent																	1							
Mailing Address		l																						
		l																						
		l																					1	
							CI	ΓY								STA	λΤΕ			ZI	ΡC	DE		
Title or Position																								
											Tele	eph	one	e ni	umt	ber								

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.

	BB&T		
Mailing Address	1909 K St., NW		
	Washington		
	CITY	STATE	ZIP CODE
Name of Bank, De	pository, etc.		
l			
Mailing Address			
	CITY	STATE	ZIP CODE