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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) New Hampshire Senate Republican Nominee Fund - Corky Messner 1305 W 11th St ADDRESS (number and street) #213 (Check if address is changed) Houston 77008 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS les@leswilliamson.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00705681 FEC IDENTIFICATION NUMBER 3. IS THIS STATEMENT NEW (N) OR 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. Williamson, Les, , , Type or Print Name of Treasurer Williamson, Les,,, [Electronically Filed] 19 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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 Only

Local 202-694-1100

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		COMMITTEE e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Name Candid		This committee is an authorized committee, and is NOT a principal campaign committee. (Completinformation below.) MESSNER, BRYANT 'CORKY', S., ,	te the candidate
Candid Party	date Affiliati	ion REP Office Sought: House X Senate President	State NH District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	/ Con	nmittee: (National, State (De	mocratic,
(d)			oublican, etc.) Party.
Politi	cal A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	eted organization is a:
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization Trade Association	ooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	gated 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.)	
Joint	Fund	draising Representative:	
(g)		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.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.		
	4.		

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V	Vrite or Type Committee Name			
1	New Hampshire	Senate Republican Nominee	Fund - Corky Mess	ner
6.	Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraising Rep	resentative, or Leadership PAC Spon	sor
	Mailing Address			
		CITY	STATE ZIP CODE	
	Relationship: Connected	Organization Affiliated Committee Joint Fundraising	g Representative Leadership PAC S	Sponsor
·.	Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and posit	tion of the person in possession of cor	nmittee
	Williamson	, Les, , ,		
	Full Name	,1305 W 11th St		
	Mailing Address			
		#213		
		Houston	TX 77008	
	Title or Position	CITY	STATE ZIP CODE	
	Treausrer	Telephone nur		442
3.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the ssistant treasurer).	e committee; and the name and addres	ss of
	Full Name Williamson of Treasurer	Les, , ,		
	Mailing Address	1305 W 11th St		
		#213 		
		Houston	TX 77008	
	Title on Decision	CITY	STATE ZIP CODE	
	Title or Position Treasurer	Telephone nur	nber 214 - 676 - 74	442

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Mailing Address	1445-A Laughlin Ave	
	McLean	22101
	McLean VA 2	22101 ZIP CODE
	CITY STATE	
Name of Bank, D	CITY STATE	
	CITY STATE Depository, etc.	
Name of Bank, D	CITY STATE Depository, etc.	
Name of Bank, D	CITY STATE Depository, etc.	