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STATEMENT OF	
ORGANIZATION	

FEC FORM 1	STATEMEN ORGANIZA		Office	PAGE 1 / 21
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Grow the Majority	/ 			
	1228 S Washington St Ste 115			
ADDRESS (number and street)				
(Check if address is changed)				
	Alexandria └ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │		VA 22314 STATE ▲	
COMMITTEE'S E-MAIL ADD	RESS			
(Check if address is changed)	llisker@hdlfec.com			
	Optional Second E-Mail Add tmoose@hdlfec.com	ress		
COMMITTEE'S WEB PAGE A (Check if address is changed)	ADDRESS (URL)			
2. DATE 01 /	14 / Y Y Y Y 12025			
3. FEC IDENTIFICATION	NUMBER ► C CO	0858373		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined	d this Statement and to the best	of my knowledge and belief it i	is true, correct and co	omplete.
Type or Print Name of Treas	urer Lisker, Lisa, , ,			
Signature of Treasurer Li	sker, Lisa, , ,		Date 01	14 / Y Y Y Y 2025
NOTE: Submission of false, en	roneous, or incomplete information r ANY CHANGE IN INFORMAT	may subject the person signing th ION SHOULD BE REPORTED V		nalties of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	n F	EC FORM 1 Revised 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
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
Party Committee: (National, State (Democratic committee of the (d) This committee is a or subordinate) committee of the Republic	ratic, can, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a:
Corporation Corporation w/o Capital Stock	or Organization
Membership Organization Trade Association Coo	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)	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.)	
(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	d PAC).

Joint Fundraising Representative:

2.

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (i) Х committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (j) committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser MIKE JOHNSON FOR LOUISIANA C00608695 С 1. AMERICAN REVIVAL PAC С C00639229

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

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	

Grow the Majority

6.	Name of Any Connected O	organization, A	filiated Committee, Join	t Fundraising Representative, o	r Leadership PAC Sponsor
	Mailing Address				
			CITY 🔺	STATE 🔺	ZIP CODE
	Relationship: Connected	Organization	Affiliated Organization	Joint Fundraising Representation	e 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	
	1	
	Alexandria VA 22314 - - -	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position ▼		
Treasurer	Telephone number 703 - 549 - 7704	5

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 VA 22314
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Treasurer	Telephone number 703 549 7705

Page	4
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Full Name of Designated Agent	Moose, Taylor, , ,
Mailing Address	228 S Washington St Ste 115
	Alexandria VA 22314
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Assistant Treasu	rer Telephone number 703 549 7705

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.

	Chain Bridge Bank		
Mailing Address	1445A Laughlin Ave		
	McLean		01
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, I	epository, etc.		
Mailing Address			
	CITY 🔺	STATE A	ZIP CODE

-EC	Form	1S	(Revised	02/2017)
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5(g) or (h). Joint Fundraising	Participant:			
CONGRESSIONAL LEADI	ERSHIP FUND	FEC	ID number	C00504530
2. NRCC		FEC	ID number	C C00075820
ALASKANS FOR NICK B		FEC	ID number	C00792341
4. FRIENDS OF DAVID SCI	HWEIKERT	FEC	ID number (C00540617
6. Name of Any Connected O	rganization, Affiliated Committee, J	oint Fundraising R	epresentative,	or Leadership PAC Sponsor
Mailing Address				
Relationship:			L STATE ▲	
Relationship.		_	STATE	
Connected C	Drganization Affiliated Committee	Joint Fundrais	ng Representativ	Leadership PAC Sponsor
8. Designated Agent: Identify b	by name, address (phone number – d	optional)		
Full Name				
Mailing Address				
	L	1		
	CITY ▲			
TITLE OR POSITION V				
I				
		Telephone	Number	
	es: List all banks or other depositorie			funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)	Optional Supplemental Inf for Lines 5(g) or (h), 6, 8 a		Page of 21
5(g) or (h). Joint Fundraising Particip	pant:		0
ELI CRANE FOR CONGRESS 1.		FEC ID number	C C00784934
2. CISCOMANI FOR CONGRESS		FEC ID number	C C00786194
3. KEVIN KILEY FOR CONGRESS		FEC ID number	C C00801985
4. VALADAO FOR CONGRESS		FEC ID number	C C00499392
6. Name of Any Connected Organiza	tion, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Mailing Address			
Relationship:	CITY A	STATE 🔺	ZIP CODE
Connected Organiza	tion Affiliated Committee Joint	Fundraising Representa	tive Leadership PAC Sponsor
B. Designated Agent: Identify by name	e, address (phone number – optional)		
Full Name			
Mailing Address			
TITLE OR POSITION ▼	CITY 🔺	STATE 🔺	ZIP CODE
	<u> </u> Te	lephone Number	

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Name of Bank, Depository, etc.																								
Mailing Address																								
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FEC Form	1S	(Revised	02/2017	

5(g) or (h).	Joint Fundraising	g Participant:					
1.		BRESS		FEC ID	number (C00665638	
2.				FEC ID	number (C00257337	
3.	JEFF HURD FOR CON	GRESS		FEC ID	number (C C00848333	
	ELECTGABEEVANS.C	ОМ		FEC ID	number (C C00849844	
4.							
6. Name	of Any Connected (Organization, Affiliated (Committee, Joint Fur	ndraising Rep	resentative,	or Leadership PAC	Sponsor
I	Mailing Address						
		1					
				1		-	
I	Relationship:				STATE	ZIP COD	E 🔺
	Connected	Organization Affiliate	ed Committee	bint Fundraising	Representativ	Leadership I	PAC Sponsor
8. Desig		Organization Affiliate		bint Fundraising	Representativ	Leadership i	PAC Sponsor
-				pint Fundraising			PAC Sponsor
Fu	nated Agent: Identify			Dint Fundraising			PAC Sponsor
Fu	nated Agent: Identify			<pre>>int Fundraising</pre>			PAC Sponsor
Fu	nated Agent: Identify			<pre>>int Fundraising</pre>			PAC Sponsor
Fu	nated Agent: Identify III Name	by name, address (phon				/e Leadership H	
Fu	nated Agent: Identify	by name, address (phon	e number – optional)				
Fu	nated Agent: Identify III Name	by name, address (phon	e number – optional)				
Fu Ma T 9. Banks	nated Agent: Identify II Name ailing Address	by name, address (phon	e number – optional)		TATE		

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	L																								
Mailing Address	L																								
Depository, etc.																									

FEC Form 1S (Revi	sed 02/2017)	Optional Supplemen for Lines 5(g) or (h)		Page of 21
	ndraising Participan			0 000740000
1. 🔤 🖂 🖂			FEC ID number	
2	EKS FOR CONGRESS	3 	FEC ID number	C C00558825
3.	R ZACH NUNN		FEC ID number	C C00784389
	OR CONGRESS		FEC ID number	C C00459297
Name of Any Cor	nected Organization	n, Affiliated Committee, Join	t Fundraising Representati	ve, or Leadership PAC Sponsor
Mailing Addre	ess			
				-
Relationship:	<u> </u>		STATE 4	
c	onnected Organization	n Affiliated Committee	Joint Fundraising Represen	ntative Leadership PAC Spon
Designated Agent	: Identify by name, a	address (phone number – opti	onal)	
Full Name				
Mailing Addres	s			
TITLE OR PC	SITION V	CITY A	STATE A	ZIP CODE

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Name of Bank, Depository, etc.	<u> </u>																						
Mailing Address																							
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FEC Form 1S (Revised 02/2017)	Optional Supplemental I for Lines 5(g) or (h), 6, 8		Page of 21
i(g) or (h). Joint Fundraising Pa	irticipant:		
1 TOM BARRETT FOR CONG	RESS	FEC ID number	С соот93976
2. JOHN JAMES FOR CON	GRESS, INC.	FEC ID number	C C00803502
ZINKE FOR CONGRESS		FEC ID number	C C00778159
	ESS	FEC ID number	C C00575167
Name of Any Connected Org	anization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Sponsor
Mailing Address			
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Deletionskins			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲ ative
. Designated Agent: Identify by	name, address (phone number – optional)		
Full Name			
Mailing Address			
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L			
TITLE OR POSITION ▼		STATE A	ZIP CODE
		Telephone Number	

Name of Bank, Depository, etc.							I																	
Mailing Address	L																							
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FEC Form 1S (Revised 02/2017)	Optional Supplemental Ir for Lines 5(g) or (h), 6, 8		Page of 21
i(g) or (h). Joint Fundraising Pa	articipant:		
		FEC ID number	С С00703058
	S	FEC ID number	C C00806018
LAWLER FOR CONGRESS 3.	; INC.	FEC ID number	C C00815415
4. BRIAN FITZPATRICK FOR	ALL OF US	FEC ID number	C C00607416
Name of Any Connected Org	anization, Affiliated Committee, Joint Fund	draising Representativ	e, or Leadership PAC Sponsor
Mailing Address			
L			
L			
Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
Connected Org	anization Affiliated Committee Join	nt Fundraising Represent	ative Leadership PAC Sponsor
B. Designated Agent: Identify by	name, address (phone number – optional)		
Full Name			
Mailing Address			
L			
L			-
TITLE OR POSITION ▼	CITY 🔺	STATE A	ZIP CODE 🔺
		Telephone Number	

Name of Bank, Depository, etc.																								
Mailing Address	L																							
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5(g) or (h)	Joint Fundraising	g Participant:					
	1 MACKENZIE FOR CON	GRESS COMMITTEE		FEC ID	number	C C00846501	
	2. ROB FOR PA			FEC ID	number	C C00852137	
	PATRIOTS FOR PERR	Y		 	number	C C00510164	
	4. MONICA FOR CONGR	ESS		FEC ID	number	C C00765719	
6. Na r	me of Any Connected	Organization, Affiliate	d Committee, Joint F	undraising Rep	resentative,	or Leadership PAC Sp	onsor
L							
L							
	Mailing Address						
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	Relationship:				STATE		
	Connected	Organization Affil	iated Committee	Joint Fundraising	Representati	ve Leadership PAC	Sponsor
8. Des	Connected				Representati	ve Leadership PAC	Sponsor
					Representati	ve Leadership PAC	Sponsor
	signated Agent: Identify				Representati	ve	Sponsor
	signated Agent: Identify				Representati	ve	Sponsor
	signated Agent: Identify				Representati	ve Leadership PAC	Sponsor
	signated Agent: Identify	by name, address (pr		al)	Representati	ve	> Sponsor
	signated Agent: Identify Full Name	by name, address (pr	one number – optiona	al)			Sponsor
9. Bar safe Nan	signated Agent: Identify Full Name	by name, address (pr	one number – optiona	al)	STATE umber		

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Mailing Address																						
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FEC Form 1S (Revised 02/2017)	Optional Supplemental In for Lines 5(g) or (h), 6, 8		Page of 21
5(g) or (h). Joint Fundraising Par	ticipant:		
	ESS	FEC ID number	C C00441014
	і́S	FEC ID number	C C00776120
	2.	FEC ID number	C C00677286
4. VAN ORDEN FOR CONGRE	SS	FEC ID number	C C00742007
6. Name of Any Connected Orga	nization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
Mailing Address			
Relationship:			
Connected Orga	anization Affiliated Committee Join	t Fundraising Representa	
B. Designated Agent: Identify by n	name, address (phone number – optional)		
Full Name			
Mailing Address			
TITLE OR POSITION ▼	CITY 🔺	STATE A	ZIP CODE
1	τη τ	elephone Number	

Name of Bank, Depository, etc.																						
Mailing Address																						
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FEC Form 1S (Revised 02/20	Optional Supplemental Info17)for Lines 5(g) or (h), 6, 8 a		Page of 21
(g) or (h). Joint Fundraising GTM NOMINEE FUND: C/		FEC ID number	C C00894436
1 GTM NOMINEE FUND 2 U U U U U U U	: CA-13	FEC ID number	C C00894444
2 GTM NOMINEE FUND: N 3	ΜE-02	FEC ID number	C C00894451
4.	ЛI-08	FEC ID number	C C00894469
. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
Mailing Address			
Relationship:		STATE A	ZIP CODE
Connected (Drganization Affiliated Committee Joint F	Fundraising Representa	ative Leadership PAC Sponso
Designated Agent: Identify b	oy name, address (phone number – optional)		
Full Name			
Mailing Address			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE
	Tele	ephone Number	

Name of Bank, Depository, etc.	<u> </u>																				
Mailing Address																					
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or (h). Joint Fundraising			C C00894485
1.		FEC ID number	
2. GTM NOMINEE FUND	Y: NJ-09	FEC ID number	C C00894493
3 GTM NOMINEE FUND:	NM-02	FEC ID number	C C00894501
4. GTM NOMINEE FUND: I	NV-03	FEC ID number	C C00894519
Name of Any Connected O	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponso
Mailing Address	L		
	<u> </u>		
Relationship:	CITY A	STATE A	ZIP CODE
Connected	Organization Affiliated Committee Joint	Fundraising Represent	ative Leadership PAC Spon
Designated Agent: Identify	by name, address (phone number – optional)		
Full Name			
Full Name			
Full Name			
Full Name			

Name of Bank, Depository, etc.																							
Mailing Address	L																						
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FEC Form 1S (Revised 02/20	Optional Supplemental Infor17)for Lines 5(g) or (h), 6, 8 and		Page of 21
(g) or (h). Joint Fundraising GTM NOMINEE FUND: N 1	•	FEC ID number	C C00894527
	OH-09	FEC ID number	C C00894535
3. GTM NOMINEE FUND: 7	-X-28	FEC ID number	C C00894543
4. GTM NOMINEE FUND: 1	-X-34	FEC ID number	C C00894550
Name of Any Connected O	rganization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	<u>_ , , , , , , , , , , , , , , , , , , ,</u>		
Relationship:			
Connected (Indraising Representa	
. Designated Agent: Identify b	by name, address (phone number – optional)		
Full Name			
Mailing Address			
TITLE OR POSITION	, CITY 🔺	STATE A	ZIP CODE
	Telep	ohone Number	

Name of Bank, Depository, etc.																							
Mailing Address	L																						
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5(g) or (h).	Joint Fundraising	Participant:							
1.		VA-03			FEC	ID number	C C0	0894568	
2.		N PARTY			FEC	ID number	C C0	0253260	
3.	REPUBLICAN PARTY	OF ARIZONA, LLC			 FEC	ID number	C C0	0008227	
4.	CALIFORNIA REPUBLI	CAN PARTY FEDE	RAL ACCT.		 FEC	ID number	C co	0140590	
4. [
6. Name	of Any Connected (Drganization, At	ffiliated Comm	ittee, Joint F	undraising F	Representative	e, or Lea	adership PAC S	ponsor
							1 1 1		
Ν	Mailing Address								
F	Relationship:		CITY	A		STATE A		ZIP CODE	
	Connected	Organization	Affiliated Corr	nmittee	Joint Fundrais	sing Representa	ative	Leadership PAG	C Sponsor
8. Design	nated Agent: Identify	by name, addre	ess (phone num	ıber – optiona	l)				
Ful	I Name								
Ма	illing Address	1							
TI	TLE OR POSITION	↓	CITY A					ZIP CODE	
TI L	TLE OR POSITION	<pre></pre>		<u> </u>	Telephone		-	= [= [] = [] ZIP CODE ▲	
т 	TLE OR POSITION	<pre></pre>		· · · · · ·	Telephone		-	= ZIP CODE ▲	
9. Banks	TLE OR POSITION	i es: List all bank			-	Number	s funds,		rents

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Mailing Address																					
Depository, etc.																					

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Page	of	21

5(g) or	(h). Joint Fundraisir	ıg Participant:		
			FEC ID number	C C00099259
	2. INDIANA REPUBLIC	CAN STATE COMMITTEE, INC.	FEC ID number	C C00006486
	3.	´ OF IOWA	FEC ID number	C C00014498
		OF LOUISIANA	FEC ID number	C C00187450
- 6. I	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	L			
	Mailing Address			
		1		
	Relationship:		STATE A	
- 8. [Designated Agent: Identif	y by name, address (phone number – optional)		
- 8. [Designated Agent: Identif	y by name, address (phone number – optional)		
- 8. [y by name, address (phone number – optional)		
- 8. [Full Name	y by name, address (phone number - optional)		
- 8. [Full Name	y by name, address (phone number – optional)		
- 8. [Full Name			
- 8. [Full Name		STATE A	
- - - - - - - - - - - - - - - - - - -	Full Name Mailing Address TITLE OR POSITION		elephone Number	s funds, holds accounts, rents
	Full Name Mailing Address TITLE OR POSITION		elephone Number	
	Full Name Mailing Address TITLE OR POSITION		elephone Number	s funds, holds accounts, rents
	Full Name		elephone Number	s funds, holds accounts, rents
	Full Name		the committee deposit	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

5(g) or (h).	Joint Fundraising	Participant:
1.	MAINE REPUBLICAN P	RTY FEC ID number C C00003111
2.		FEC ID number C C00041160
3.		N STATE CENTRAL COMMITTEE FEC ID number C C00008086
4.		CENTRAL COMMITTEE FEC ID number C C00082925
6. Name	of Any Connected	organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
Ν	Nailing Address	
F	Relationship:	CITY ▲ STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons
	Connected	Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons
8. Design		by name, address (phone number – optional)
-		
Ful	ated Agent: Identify	
Ful	ated Agent: Identify	
Ful	ated Agent: Identify	
Ful Ma	ated Agent: Identify	by name, address (phone number – optional)
Ful Ma	ated Agent: Identify	by name, address (phone number – optional)

Name of Bank, Depository, etc.																							
Depository, etc.																							
Mailing Address																							
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5(g) or	(h). Joint Fundraisi	ng Participant:				
	NEW HAMPSHIRE RE 1 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	PUBLICAN STATE COMMITTEE	FEC	C ID number	C C00136457	
	2 REPUBLICAN CAM		FEC	C ID number	C C00020818	
	NY REPUBLICAN FE		FEC	C ID number	C C00055582	
	4. NORTH CAROLINA F		FEC	C ID number	C C00038505	
6. N	Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising	Representative	e, or Leadership	PAC Sponsor
	Mailing Address					
	Relationship:			J L STATE ▲		
				0		
_	Connecte	d Organization Affiliated Committee	Joint Fundra	ising Representa	tive Leade	rship PAC Sponsor
		d Organization Affiliated Committee		ising Representa	tive Leade	rship PAC Sponsor
					Leade	rship PAC Sponsor
	Designated Agent: Identif			ising Representa	tive Leade	rship PAC Sponsor
- 8. D	Designated Agent: Identif			ising Representa	tive Leade	rship PAC Sponsor
- 8. D	Designated Agent: Identif			ising Representa	tive Leade	rship PAC Sponsor
– 8. D	Designated Agent: Identif	y by name, address (phone number – optiona		ising Representa		rship PAC Sponsor
– 8. D	Designated Agent: Identif Full Name	y by name, address (phone number – optiona	al)			
9. E	Designated Agent: Identif	y by name, address (phone number – optiona	al)	STATE		

		_	_	_		<u> </u>	_	<u> </u>	<u> </u>	-		-		<u> </u>		 	 <u> </u>	<u> </u>	_	 <u> </u>	<u> </u>	-	_	—	 	<u> </u>	 _	 	_	 	_	
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FEC Form 1S (Revised 02/2017)

UTIVE COMMITTEE	FEC ID number FEC ID number FEC ID number FEC ID number ising Representative	C C00162339 C C00153031 C C00044842 C C00143743 e, or Leadership PAC Sponsor
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	Relationship:		CITY	/			L STATE ▲			
	Connected	Organization	Affiliated Co	ommittee	Joint	Fundrais	ing Represen	tative	Leadershi	p PAC Spons
Desig	nated Agent: Identify	by name, addres	s (phone nu	mber – op	tional)					
Fu	ull Name									
M	ailing Address									
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