**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. ALABAMA REPUBLICAN PARTY 3505 LORNA ROAD ADDRESS (number and street) (Check if address is changed) **HOOVER** 35216 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address RPHILLIPS@ALGOP.ORG is changed) Optional Second E-Mail Address ALGOP@REDCURVE.COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00044776 FEC IDENTIFICATION NUMBER > 3. X 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. Type or Print Name of Treasurer PHILLIPS, REED, , MR., PHILLIPS, REED, , MR., Date 03 05 2025 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

FEC Form 1 (Revised 03/2022)	Page <b>2</b>
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	tion below.)
(b) This committee is an authorized committee, and is NOT a principal campaign comminformation below.)	ittee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	President  District
(c) This committee supports/opposes only one candidate, and is NOT an authorized col	mmittee.
Name of Candidate	
Party Committee:	
(d) X This committee is a STA (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on li	ne 6.) Its connected 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 scommittee. (i.e., nonconnected committee)	separate segregated 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	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 a	ccounts (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 process committees or committees of a feet of the committee of the committee of a feet of the committee of	·
(j) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal car	· · · · · · · · · · · · · · · · · · ·
Committees Participating in Joint Fundraiser	
1	C
	C

1	FEC Form 1 (Revised 0	2/2009)	Page <b>3</b>
٧	Vrite or Type Committee Name		
_		JBLICAN PARTY	
6.		rganization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
	NRSC VICTORY		
	Mailing Address	228 S WASHINGTON ST STE 115	
		ALEXANDRIA	22314
		CITY ▲ STATI	E ▲ ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Repre	esentative Leadership PAC Spons
		7. Commission of the control of the	
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the p	person in possession of committee
	PHILLIPS,	REED, , MR.,	
	Full Name		
	Mailing Address	3505 LORNA RD	
		I	
		BIRMINGHAM	35216
		CITY A CTAT	E ▲ ZIP CODE ▲
	Title or Position ▼	CITY ▲ STATI	E A ZIP CODE A
	TREASURER	Telephone number	205   212   5910
		Telephene namber	
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the commassistant treasurer).	nittee; and the name and address of
		REED, , MR.,	
	of Treasurer		
	Mailing Address	3505 LORNA RD	
		BIRMINGHAM	_   35216
		CITY ▲ STATE	E ▲ ZIP CODE ▲
	Title or Position ▼		
	TREASURER		205   212   -   5910

FEC Form 1	(Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
	Telephone number	
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the committee deposits funds, xes or maintains funds.	, holds accounts, rents
Name of Bank, D	epository, etc.	
	SERVISFIRST BANK	
Mailing Address	850 SHADES CREEK PKWY	
	STE 200	
	MOUNTAIN BRK	5209-4463
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
	REGIONS BANK	
Mailing Address	3065 JOHN HAWKINS PKWY	
	BIRMINGHAM AL 35	5244
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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(h). Joint Fundrais	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
TRUMP 47 COMMI	TTEE, INC.		
Mailing Address	P.O. BOX 509		
	ARLINGTON	VA	22216
<b>5</b>	CITY A	STATE A	ZIP CODE ▲
		nint Fundraising Represent	ative Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
Connect  Designated Agent: Ident	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee X Jo	oint Fundraising Represent	Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	and Organization Affiliated Committee X Journal of the State of St		
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee X Joint Joi	sint Fundraising Represent	Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ed Organization Affiliated Committee X Joint Joi		
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite tafety deposit boxes or necessary to the content of	and Organization	STATE   Telephone Number  ch the committee deposit	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or not be a significant or signi	Affiliated Committee X Journal of the state	STATE   Telephone Number  ch the committee deposit	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

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PEC ID number C  3.		ng Participant:				
A. STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number   -   -    TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TELEPHONE Number   -   -    TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TELEPHONE Number   -   -    THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TELEPHONE Number   -   -    THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  TELEPHONE Number   -   -    THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE A  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE A  THE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE A  THE OR POSITION ▼ CITY ▲ STATE A  THE OR POSITION ▼ CITY A  THE OR POSITION THE O	1.			FEC ID	number	C
A	2.			FEC ID	) number	C
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sport  Mailing Address    Connected Organization	3.			FEC ID	number	С
Mailing Address    Relationship:	4			FEC IE	number	С
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC s  esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number	ame of Any Connected	Organization, Aff	iliated Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spon
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization						
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC s  esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number						
Connected Organization	Mailing Address					
Connected Organization						
Connected Organization						
esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number — — — — — — — — — — — — — — — — — — —	Relationship:		CITY A		STATE A	ZIP CODE ▲
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  CHAIN BRIDGE BANK, N.A.  Popository, etc.  Mailing Address  1445A LAUGHLIN AVENUE						
TITLE OR POSITION   CITY   Telephone Number  Tel	Full Name			, 		
TITLE OR POSITION   CITY   Telephone Number  Tel						
Title OR POSITION  Telephone Number  Telephone N						
anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rerafety deposit boxes or maintains funds.  ame of Bank, epository, etc.  Mailing Address    1445A LAUGHLIN AVENUE   1445A LAU						
affety deposit boxes or maintains funds.  ame of Bank, CHAIN BRIDGE BANK, N.A. epository, etc.  Mailing Address    1445A LAUGHLIN AVENUE	Mailing Address				STATE A	
Mailing Address	Mailing Address					
MCLEAN	Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or maintain and the control of Bank, CHAIN	pries: List all banks aintains funds.	CITY ▲ s or other depositories in v	Telephone N	umber	ZIP CODE A
MCLEAN	Mailing Address  TITLE OR POSITION  anks or Other Depositor Deposi	ories: List all banks aintains funds.	CITY As or other depositories in value.	Telephone N	umber	ZIP CODE A
	Mailing Address  TITLE OR POSITION  Ganks or Other Depositor afety deposit boxes or mail are of Bank, depository, etc.	ories: List all banks aintains funds.	CITY As or other depositories in value.	Telephone N	umber	ZIP CODE A