FEC

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. YOUNG VICTORY COMMITTEE PO BOX 1053 ADDRESS (number and street) (Check if address is changed) BLOOMINGTON 47402 IN CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS FEC@TODDYOUNG.ORG (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00621581 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. KEVIN BROGHAMER Type or Print Name of Treasurer KEVIN BROGHAMER [Electronically Filed] 07 12 2016 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

l	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE				
Candidate Committee:						
(a) This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate			
Nam Cand	e of didate					
	didate / Affiliatio	Office Sought: House Senate President	State			
(c)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
Nam	e of	The committee capped to appear only one canadate, and to the canadate committee				
	didate					
Par	ty Con	nmittee:	(Domooratio			
(d)			(Democratic, Republican, etc.) Party.			
Poli	tical 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.)				
Join	t Fund	raising 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.	o or more political			
(h)	\times	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			
	Com	Committees Participating in Joint Fundraiser				
	1.	FRIENDS OF TODD YOUNG INC	4 59255			
	2.	INDIANA REPUBLICAN STATE COMMITTEE, INC. FEC ID number C C000	006486			
	3.	OORAH! POLITICAL ACTION COMMITTEE FEC ID number C COOS	551853			
	4.					

Write or Type Committee Name YOUNG VICTORY COMMITTEE 5. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spor CUSTOdian of Records: Identify by name, address (phone number optional) and position of the person in possession of commit books and records. KEVIN BROGHAMER Full Name PO BOX 1053 Mailing Address BLOOMINGTON IN 47402 Title or Position CITY STATE ZIP CODE TREASURER Telephone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name KEVIN BROGHAMER KEVIN BROGHAMER KEVIN BROGHAMER KEVIN BROGHAMER KEVIN BROGHAMER KEVIN BROGHAMER	FEC Form 1	1 (Revised 02/2009) Page 1	ge 3
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Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spor Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commit books and records. KEVIN BROGHAMER Full Name PO BOX 1063 Mailing Address PO BOX 1063 Mailing Address Title or Position CITY STATE ZIP CODE TREASURER Telephone number 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 KEVIN BROGHAMER	YOUNG \	VICTORY COMMITTEE	
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CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spor Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commit books and records. KEVIN BROGHAMER Full Name PO BOX 1053 Mailing Address PO BOX 1053 Title or Position CITY STATE ZIP CODE TREASURER Telephone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name KEVIN BROGHAMER	NONE		
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books and records. KEVIN BROGHAMER Full Name PO BOX 1053 Mailing Address BLOOMINGTON IN 47402 Title or Position CITY STATE ZIP CODE TREASURER Telephone number 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 KEVIN BROGHAMER			
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Mailing Address BLOOMINGTON	Full Name	.PO BOX 1053	
Title or Position CITY STATE ZIP CODE TREASURER Telephone number Telephone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name KEVIN BROGHAMER	Mailing Address		
Title or Position CITY STATE ZIP CODE TREASURER Telephone number Telephone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name KEVIN BROGHAMER		PLOOMINGTON IN 47402	
TREASURER Telephone number		BLOOMINGTON	
Telephone number	Title or Position	CITY STATE ZIP COI	DE
. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address o any designated agent (e.g., assistant treasurer). Full Name KEVIN BROGHAMER	TREASURER	Tolophono number	
any designated agent (e.g., assistant treasurer). Full Name KEVIN BROGHAMER		Telephone number	
Full Name KEVIN BROGHAMER	Treasurer: List th	the name and address (phone number optional) of the treasurer of the committee; and the name and	address of
Tan Name			
	Full Name of Treasurer	REVIN BROGHAMER	
Mailing Address PO BOX 1053	Mailing Address	PO BOX 1053	
BLOOMINGTON IN 47402		BLOOMINGTON IN 47402	
CITY STATE ZIP CODE Title or Position	Title or Position	CITY STATE ZIP COL	DΕ
TREASURER Telephone number			

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Full Name of Designated	KEVIN BROGHAMER		
Agent			
Mailing Address	PO BOX 1053		
	BLOOMINGTON	IN	47402
	CITY	STATE	ZIP CODE
Title or Position TREASURER	Telephon	e number	- -
Mailing Address	CHAIN BRIDGE BANK 1445 LAUGHLIN AVE	1/4	22101
	MCLEAN	VA	22101
	CITY	STATE	ZIP CODE
Name of Bank, [Depository, etc.		
Mailing Address			
			<u> </u>