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. Alaskans for Nick Begich PO Box 671710 ADDRESS (number and street) (Check if address is changed) Chugiak 99567 AK CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address accounting@alaskansfornickbegich.com is changed) Optional Second E-Mail Address kbk@mtaonline.net COMMITTEE'S WEB PAGE ADDRESS (URL) alaskansfornickbegich.com (Check if address is changed) DATE 2024 C00792341 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT NEW (N) 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 Kencaid, Ken,, Date 12 05 2025 Signature of Treasurer Kencaid, Ken, , , 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

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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.)	the candidate
Name of Candidate Begich, Nicholas, , , III	
Candidate Party Affiliation REP Office Sought: House Senate President	State AK District 01
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republica	tic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ted organization is a:
Corporation Corporation w/o Capital Stock Labor	Organization
Membership Organization Trade Association Coope	rative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ted 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 I	PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) 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
(j) 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.	or more political
Committees Participating in Joint Fundraiser	
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۷	Vrite or Type Committee Name			
	Alaskans for Nic			
6.	-	rganization, Affiliated Committee, Jo	• .	itive, or Leadership PAC Sponsor
	Begich for AK-AL Re	publican Nominee Fund 202	4 	
	Mailing Address	PO Box 9891		
		Arlington	VA	22219
		CITY ▲	STATI	E ▲ ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization	Joint Fundraising Repre	esentative Leadership PAC Sponso
7.	Custodian of Records: Idention books and records.	ify by name, address (phone number	optional) and position of the p	verson in possession of committee
	Schrock, T	ylan, , ,		
	Full Name			
	Mailing Address	PO Box 2814		
		Seward	AK	99664
		CITY ▲	STATI	E ▲ ZIP CODE ▲
	Title or Position ▼			
	Assistant Treasurer		Telephone number	
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) assistant treasurer).	of the treasurer of the comm	nittee; and the name and address of
	Full Name Kencaid, K	en, , ,		
		PO Box 190171		
	Mailing Address			
		Anchorage	A	99530
	Title on Decition -	CITY ▲	STATI	E ▲ ZIP CODE ▲
	Title or Position ▼			. 007 020
	Treasurer		Telephone number	907 - 232 - 1808

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent Mailing Address	Schrock, Tylan, , , , PO Box 2814	
	Seward	99664
Title or Position	CITY ▲ STATE	▲ ZIP CODE ▲
Assistant Treasur		
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the committee depos ses or maintains funds.	sits funds, holds accounts, rents
Name of Bank, D	epository, etc.	
	Northrim Bank	
Mailing Address		
	Anchorage	99503
	CITY A STATE	▲ ZIP CODE ▲
Name of Bank, D	epository, etc.	
	Middletown Valley Bank	
Mailing Address	1150 Conrad Ct	
	Hagerstown	21740
	CITY ▲ STATE	▲ ZIP CODE ▲

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

(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	Fundraising Representativ	ve, or Leadership PAC Spons
NRCC VICTORY 20	24		
Mailing Address	320 FIRST STREET SE		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connect		Joint Fundraising Represen	tative Leadership PAC Spo
Connect	ed Organization Affiliated Committee	Joint Fundraising Represen	tative Leadership PAC Spo
Connect Designated Agent: Ident	ed Organization Affiliated Committee	Joint Fundraising Represen	Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee	Joint Fundraising Represen	Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee	Joint Fundraising Represen	Leadership PAC Spo
Connect Designated Agent: Ident Full Name	Affiliated Committee Affiliated Committee Affiliated Committee	Joint Fundraising Represen	Leadership PAC Spo
Connect Designated Agent: Ident Full Name Mailing Address	Affiliated Committee Affiliated Committee Affiliated Committee	al)	
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or necessity.	Affiliated Committee fy by name, address (phone number – option CITY CITY Ories: List all banks or other depositories in the second committee Affiliated Committee CITY Affiliated Committee Aff	al) STATE Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or nother Deposite Safety deposite Safety deposit boxes or nother Deposite Safety deposite Safety deposite Safety deposi	Affiliated Committee Affiliated Committee Ty by name, address (phone number – option CITY CITY Ories: List all banks or other depositories in the naintains funds. Bridge Bank	al) STATE Telephone Number	ZIP CODE A

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Joint Joi	int Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Joint Joi	int Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint Joi	int Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint J		
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Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or management of the control o	Affiliated Committee	STATE A Telephone Number	ZIP CODE A
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite afety deposit boxes or make the proposition of Bank, Depository, etc.	Affiliated Committee	STATE A Telephone Number	ZIP CODE A

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

h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
EMMER MAJORITY	BUILDERS		
Mailing Address	824 S. MILLEDGE AVE. STE. 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Join fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Sponse
AMERICAN BATTLE	EGROUND FUND		
1			
	PO BOX 30844		
Mailing Address	1 O BOX 30044		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
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Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional)		
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Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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h). Joint Fundrais	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
NICK BEGICH VICT	ORY COMMITTEE		
Mailing Address	22255 DOG SLED CT		
	CHUGIAK	AK	99567
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Jo	int Fundraising Represent	LeaderShip FAC Sp
		int Fundraising Represent	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ig i ai iioipaitii		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
Mailing Address	320 FIRST STREET SE		
Relationship:	WASHINGTON CITY A	DC STATE A	20003 ZIP CODE ▲
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	Affiliated Committee X Joint by by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
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iated Committee, Joint CITY Affiliated Committee (phone number – option	FEC ID FEC ID FEC ID FEC ID Joint Fundraising	DC STATE A	20003 ZIP C	AC Spons
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CITY A Affiliated Committee	FEC ID	oresentativ	e, or Leadership P	- ODE
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CITY A Affiliated Committee	Joint Fundraising	DC STATE A	20003 ZIP C	- ODE
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CITY A Affiliated Committee		STATE A	ZIP C	
Affiliated Committee X		STATE A	ZIP C	
Affiliated Committee X		STATE A	ZIP C	
Affiliated Committee X				
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CITY A	;	STATE ▲	ZIP COI	DE 🛦
	Telephone N	umber _		-
_	or other depositories in v	Telephone Nor other depositories in which the commit	Telephone Number or other depositories in which the committee deposit	

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

h). Joint Fundraisi	ng rantopanti		
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2.		FEC ID number	С
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HURD BEGICH VIC	I Organization, Affiliated Committee, Joint Fund	araising Hepresentative	e, or Leadersnip PAC Spons
Mailing Address	2318 CURTIS STREET		
Relationship:	DENVER CITY A	CO STATE A	80205 ZIP CODE ▲
riciationship.	GITT A	SIAIE	ZIF GODE
	Affiliated Committee X Jointy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
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h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected Transportation Trust	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
<u> </u>			
Mailing Address	502 6th St		
Dolotionohio	Hudson	WI WI	54016
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Join y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
Connecte		t Fundraising Represent	Leadership PAC Spo
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lame of Any Connected	d Organization, Affiliated Co	ommittee, Joint Fu	ndraising Represent	ative, or Le	eadership PAC Spon
TEAM HUDSON					
Mailing Address	824 S MILLEDGE AVE, S	TE 101		1 1 1 1	
Č					
	ATHENS		GA	30	0605
Relationship:	C	ITY 🛦	STATE		ZIP CODE ▲
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