FEC

Only

STATEMENT OF

PAGE 1 / 16

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Illinois Republican Party - Federal PO Box 78 ADDRESS (number and street) (Check if address is changed) Springfield 62705 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address tcdatwyler@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) illinois.gop (Check if address is changed) DATE 2025 C00005926 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 Nelson, Myles,, Date 10 15 2025 Signature of Treasurer Nelson, Myles, , , 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 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate informat	ion 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 cor	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 lir	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 s committee. (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	5.)
(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 ac	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 procommittees/organizations, at least one of which is an authorized committee of a federal committee.	
(j) This committee collects contributions, pays fundraising expenses and disburses net process committees/organizations, none of which is an authorized committee of a federal can	-
Committees Participating in Joint Fundraiser	
1	C
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•	FEC Form 1 (Revised 0	2/2009)		Page 3
٧	Vrite or Type Committee Name			
	Illinois Republica	n Party - Federal		
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraisi	ng Representative, or Lea	dership PAC Sponsor
	Republican National	Committee		
	Mailing Address	310 1st St SE		
		Washington	DC 200	003-1885
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization Joint Fu	undraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Idention books and records.	fy by name, address (phone number optional) and p	position of the person in pos	session of committee
	Nelson, My	les, , ,		
	Mailing Address	PO Box 64897		
	· ·			
		Chicago	IL 606	664-0897
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Teleph	none number 715	- 338 - 8544
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasuressistant treasurer).	er of the committee; and th	ne name and address of
	Full Name Nelson, My of Treasurer	les, , ,		
	Mailing Address	PO Box 64897		
	-			
		Chicago	IL 606	664-0897
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Teleph	none number 715	- 338 - 8544

FEC Form	(Revised 02/2009)		Page 4
Full Name of Designated Agent	Datwyler, Thomas, , ,		
Mailing Address	PO Box 183		
	Hudson	wi L	54016
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasu	rer	one number 715	338 - 8544
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the coxes or maintains funds.	ommittee deposits fun	ds, holds accounts, rents
Name of Bank, I	Depository, etc.		
	Fifth Third Bank		
Mailing Address	38 Fountain Square Plaza		
	Cincinnati	OH	45263
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, I	Depository, etc.		
	Chain Bridge Bank		
Mailing Address	1445A Laughlin Ave		
	McLean	L VA	22101
	CITY ▲	STATE ▲	ZIP CODE ▲

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

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(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
-	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Representa	ative Leadership PAC Spo
Connecte	ed Organization X Affiliated Committee Join	t Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization X Affiliated Committee Join	t Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization X Affiliated Committee Join	t Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization X Affiliated Committee Join	t Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization X Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	ed Organization X Affiliated Committee Join fy by name, address (phone number – optional) CITY		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or make the connected agents.	Affiliated Committee Join fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Deposite Safety deposit boxes or make the safety deposit boxes or ma	Affiliated Committee Join fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which naintains funds. Fargo Bank	STATE A	ZIP CODE A

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

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h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Rodney Illinois Victor	Organization, Affiliated Committee, Joint Fur ry Fund	idraising Representative	e, or Leadersnip PAC Spon
Mailing Address	499 S Capitol St SW		
	Ste 407		
	Washington	DC	20003-4016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Jo	oint Fundraising Representation	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Jo	oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee X Joy by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	d Organization Affiliated Committee X Journal of the state of the stat	STATE A Telephone Number	ZIP CODE A
Connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, Truist	d Organization Affiliated Committee X Journal of Journal of State	STATE A Telephone Number	ZIP CODE A
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h). Joint Fundraisi	•		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
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ame of Any Connected Take Back the Hous	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
Mailing Address	PO Box 30844		
	Bethesda	MD	20824-0844
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	fy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		ative Leadership PAC Sp
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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
-	l Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
BOST VICTORY FU	ND 		
Mailing Address	824 S Milledge Ave		
	Ste 101		
	Athens	GA L	30605
	OITV	STATE ▲	ZIP CODE ▲
	CITY ▲ ed Organization	Fundraising Represent	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi	Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	Ative Leadership PAC Spo
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint fy by name, address (phone number – optional) CITY		
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee X Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE ZIP CODE ts funds, holds accounts, rents

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
PEKAU VICTORY F	Organization, Affiliated Committee, Joint Fund UND	draising Representative	e, or Leadership PAC Spon
<u> </u>			
Mailing Address	9501 W 144TH PL		
	ORLAND PARK		60462
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mane of Bank, epository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mane of Bank, epository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, ren

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

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	d Organization, Affiliated Committee, Joint F	undraising Representativ	re, or Leadership PAC Spons
ESTHER JOY KING	VICTORY FUND		
Mailing Address	824 S MILLEDGE AVE		
Ū i iii	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
П		Joint Fundraising Represent	
Designated Agent: Ident	ify by name, address (phone number - optional	II)	
Full Name	ify by name, address (phone number – optiona		
	ify by name, address (phone number – optiona	il)	
Full Name	ify by name, address (phone number – optional		
Full Name			ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A		ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION	CITY ▲ ories: List all banks or other depositories in w	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or necessity.	CITY ▲ ories: List all banks or other depositories in w	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION	CITY ▲ ories: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be safety deposit.	CITY ▲ ories: List all banks or other depositories in whaintains funds.	STATE A Telephone Number hich the committee deposi	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be boxes or not be boxes. Depository, etc.	CITY ▲ ories: List all banks or other depositories in what in a funds.	STATE Telephone Number hich the committee deposi	ts funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be boxes or not be boxes. Depository, etc.	CITY ▲ ories: List all banks or other depositories in what in a funds.	STATE Telephone Number hich the committee deposi	ts funds, holds accounts, rents

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(h). Joint Fundraisi	ng Participant:			
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3.		FEC ID	number	C
4.		FEC ID	number	С
lame of Any Connected The Firewall Project	Organization, Affiliated Committee, J	Joint Fundraising Rep	resentative,	or Leadership PAC Spons
Mailing Address	PO Box 183			
	Hudson		WI	54016
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Affiliated Committee fy by name, address (phone number –	X Joint Fundraising optional)	Representat	ve Leadership PAC Spo
	_		Representati	Leadership PAC Spo
esignated Agent: Identi	_		Representat	Leadership PAC Spo
Pesignated Agent: Identi	_		Representati	Leadership PAC Spo
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Pesignated Agent: Identi	fy by name, address (phone number –	optional)	Representati	Leadership PAC Spo
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number –	optional)	STATE A	
Full Name Mailing Address	fy by name, address (phone number –	optional) Telephone Nu	STATE A	ZIP CODE A
Full Name Mailing Address	fy by name, address (phone number – control of the	optional) Telephone Nu	STATE A	ZIP CODE A
Pesignated Agent: Identification of the Position of the Positi	city by name, address (phone number — city by name, address (phone num	optional) Telephone Nu	STATE A	ZIP CODE ZIP CODE funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the content of Bank,	city by name, address (phone number — city by name, address (phone num	optional) S Telephone Nues in which the committee	STATE A	ZIP CODE ZIP CODE funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the property of the property of the position of the property of the position of the property of the propert	city by name, address (phone number — city by name, address (phone num	optional) S Telephone Nues in which the committee	STATE A	ZIP CODE ZIP CODE funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the property of the property of the position of the property of the position of the property of the propert	city by name, address (phone number — city by name, address (phone num	optional) S Telephone Nues in which the committee	STATE A	ZIP CODE ZIP CODE funds, holds accounts, rents

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h). Joint Fundraisi	•		
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3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
PROTECT THE HO	JSE 2024		
Mailing Address	PO Box 30844		
	Bethesda	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Jo fy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A

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

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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
ame of Any Connected GROW THE MAJOR	l Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
GROW THE MAJOR			
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Jo	int Fundraising Representa	Leadership PAC Sp
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2. 🔲		<u> </u>		FEC I	D number	С	
3.				FEC I	D number	С	
4.	1 1 1 1 1 1			FEC I	D number	С	
Name of	Any Connected	Organization, A	ffiliated Committee, Joint	Fundraising Re	presentative	e, or Leadership	PAC Spons
	VICTORY						
Mail	iling Address	228 S WASHI	NGTON ST				
		STE 115					
		ALEXANDRIA	\ 		_ VA	22314	
			CITY A		STATE A	ZIP	CODE ▲
		Organization by name, addre	Affiliated Committee	≺ Joint Fundraisin	ng Representa	ative Leade	rship PAC Sp
	Connected ed Agent: Identify				ng Representa	ative Leade	rship PAC Sp
esignate Full N	Connected ed Agent: Identify				ng Representa	ative Leade	rship PAC Sp
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h). Joint Fundraisi			
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3.		FEC ID number	С
4.		FEC ID number	С
		,	
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
TRUMP 47 COMMIT	TEE, INC.		
Mailing Address	P.O. BOX 509		
	ARLINGTON	VA	22216
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee X J		Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	city by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	city by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
-	Organization, Affiliated Committee, Joint Fund		e, or Leadership PAC Spon
<u> </u>			
Mailing Address	PO B0X 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rent
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