Image# 202009239284717875			_	DAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4 —
			C	ffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
LaTurner Victory				
ADDRESS (number and street)	PO Box 67237			
(Check if address is changed)				
is changed)	Topeka │		KS 660 STATE ▲	667  ZIP CODE ▲
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)	les@leswilliamson.com	n 		
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
	<sup>D</sup> / Y Y Y Y 3 2020			
3. FEC IDENTIFICATION N	UMBER ► C C	:00759233		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief i	t is true, correct and	d complete.
Type or Print Name of Treasure	er Williamson, Les, , ,			
Signature of Treasurer	amson, Les, , ,	[Electronically Filed]	Date 09	/ D D / Y Y Y Y 23 2020
NOTE: Submission of false, error		may subject the person signing		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYF	E OF C	OMMITTEE	
Ca	ndidate	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. (Complein information below.)	ete the candidate
	ne of didate		
	didate y Affiliatio	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Par	rty Con	nmittee:	
(d)			emocratic, publican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a:
		Corporation Corporation w/o Capital Stock	abor 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 segre committee. (i.e., nonconnected committee)	egated 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.)	
Joir	nt 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.	or more political
(h)		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
	Com	mittees Participating in Joint Fundraiser	
	1.	KANSANS FOR LATURNER	8346
	2.	KANSAS REPUBLICAN PARTY	4606
	3.	FEC ID number	
	4.	FEC ID number	

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Write or Type Committee Name

## LaTurner Victory Fund

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

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<i>.</i>	Cus	stodi	ian	of	Re	coi	rds	: I	de	ntif	fy I	by	na	me	e, a	adc	res	s (	(ph	non	ie i	nur	nb	er	(	opt	ion	al)	ar	nd	po	sitic	n	of	the	р	ers	on	in	рс	SS	es	sio	n o	of c	om	mi	tee

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Williamsor	ı, Les, , ,
Full Name	
Mailing Address	PO Box 67237
	L
	Topeka KS 66667
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 214 676 7442

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	Williamson, Les, , ,				
Mailing Address	PO Box 67237				
	Topoko			166667	
	Topeka		KS	00007	
Title or Position		CITY	STATE		

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Full Name of Designated Agent														1									1			
Mailing Address																										
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						C	:IT)	(								STA	ΤE				ZII	ΡC	OD	١E		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

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 I	Bridge Bank		
Mailing Address	1445-A Laughlin Ave		
	McLean	VA 22101	
	CITY	STATE	ZIP CODE
Name of Bank, Depository, e	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE