PAGE 1 / 13 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE **471 EAST BROAD STREET** ADDRESS (number and street) **SUITE 1510** (Check if address is changed) **COLUMBUS** 43215 OH CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address ORP@BROGHAMERLLC.COM is changed) Optional Second E-Mail Address FEC@OHIOGOP.ORG COMMITTEE'S WEB PAGE ADDRESS (URL) WWW.OHIOGOP.ORG (Check if address is changed) DATE 2024 C00162339 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 REDDEN, DIANE, CUNNINGHAM, REDDEN, DIANE, CUNNINGHAM, , Date 80 29 2024 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.

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:
Use			Federal Election Commission
Only			Toll Free 800-424-9530 Local 202-694-1100
,			LUCAI 202-054-1100

FEC Form 1 (Revised 03/2022)	ıge 2
TYPE OF COMMITTEE:	
Candidate 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. (Complete the candid information below.)	ate
Name of Candidate	
Candidate Office Starty Affiliation Sought: House Senate President	-
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	ct
Name of Candidate	
Party Committee: (d) X This committee is a STA (National, State or subordinate) committee of the REP (Democratic, Republican, etc.) Party Committee:	arty
Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	zation is a:
Corporation Corporation w/o Capital Stock Labor Organization Trade Association Cooperative	On
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund of committee. (i.e., nonconnected committee)	r 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 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 or more p committees/organizations, at least one of which is an authorized committee of a federal candidate.	olitical
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more proceeds committees/organizations, none of which is an authorized committee of a federal candidate.	olitical
Committees Participating in Joint Fundraiser	
1	

FEC Form 1 (Revised 02/2009)	Page
------------------------------	------

·	-		_
1441. = 6 1 1.1			
Write or Type Committee Name			

. Name of		ICAN PARTY STATE CEN Organization, Affiliated Committee, Joint		
Mailing A	ddress	824 S MILLEDGE AVE STE 101		
		ATHENS	GA 30	605
		CITY ▲	STATE ▲	ZIP CODE ▲
Relationsh	nip: Connect	ed Organization Affiliated Organization	X Joint Fundraising Representative	Leadership PAC Spons
Custodia books and		entify by name, address (phone number op	tional) and position of the person in pos	session of committee
- " N	1	HAMER, KEVIN, , ,		
Full Name		471 EAST BROAD STREET		
Mailing A	ddress	SUITE 1510		
		COLUMBUS	OH 43	215
		CITY ▲	STATE ▲	ZIP CODE ▲
Title or Po				
COMPLIA	ANCE DIRECTOR		Telephone number 614	- <u>228</u> - <u>2481</u>
		and address (phone number optional) of i., assistant treasurer).	the treasurer of the committee; and the	ne name and address of
Full Name	1,112,002	N, DIANE, CUNNINGHAM, ,		
of Treasur	rer	471 EAST BROAD STREET		
Mailing A	ddress			
		SUITE 1510		
		COLUMBUS	OH 43	215
		CITY ▲	STATE ▲	ZIP CODE ▲
Title or Po	osition ▼			
TREASU	RFR	1	614	ı 591 _{I I} 4852

FEC Form 1	I (Revised 02/2009)		Page 4
Full Name of Designated Agent	JAMES, GARY, , ,		
Mailing Address	471 EAST BROAD STREET SUITE 1510		
	COLUMBUS		3215
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
ASSISTANT TRI	EASURER Teleph	none number 614	- 412 - 8704
	Depositories: List all banks or other depositories in which the exes or maintains funds.	committee deposits funds,	holds accounts, rents
Name of Bank, [Depository, etc.		
	HUNTINGTON NATIONAL BANK		
Mailing Address	17 S HIGH STREET		
	COLUMBUS	OH 43	2215
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.		
	CHAIN BRIDGE BANK		
Mailing Address	1445-A LAUGHLIN AVE		
	MCLEAN	VA22	101
	CITY ▲	STATE ▲	ZIP CODE ▲

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

Page ___ **of** ____

h). Joint Fundraisi	ng raiticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
PROTECT THE HO	I Organization, Affiliated Committee, Joint Fund USE 2024	raising Hepresentative	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	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
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or m	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification 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 Tries: List all banks or other depositories in which paintains funds. S FARGO BANK	STATE A	ZIP CODE A

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

Page ___ **of** ____

h). Joint Fundraisi	3		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fun	ndraising Representative	e, or Leadership PAC Spon
<u> </u>			
	2010 1111 - 707 117		
Mailing Address	824 S. MILLEDGE AVE		
	STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		oint Fundraising Representa	Leadership PAC Sp
	Affiliated Committee X Jo	oint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		oint Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cories: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A

Page	of	13

(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	С
-	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
CAREY VICTORY F	-UND 		
Mailing Address	824 S MILLEDGE AVE		
	STE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect		int 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	int Fundraising Represent	Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X Jo		
Connect Designated Agent: Ident Full Name	ed Organization Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Spo
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO	ed Organization Affiliated Committee X Jo ify by name, address (phone number – optional)		
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or research.	ed Organization	STATE A Telephone Number	ZIP CODE A
Connect Designated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or related to the position of Bank, Depository, etc.	ed Organization	STATE A Telephone Number	ZIP CODE A

Page	of	13	
raue	OI		

Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address		ng Participant:		
3	1.		FEC ID number	C
A. STATE A ZIP CODE Connected Organization Affiliated Committee, Joint Fundraising Representative, or Leadership PAC GROW THE MAJORITY Mailing Address 228 S WASHINGTON ST STE 115 ALEXANDRIA ALEXANDRIA ALEXANDRIA CITY A STATE A ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION CITY A STATE A ZIP CODE Telephone Number — Telephone Number — Telephone Number — CITY A STATE A ZIP CODE Tolephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Tolephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE TELEPHONE NUMBER — CITY A STATE A ZIP CODE Telephone Number — CITY A STATE A ZIP CODE TELEPHONE NUMBER — CITY A STATE A ZIP CODE TELEPHONE NUMBER — CITY A STATE A ZIP CODE TELEPHONE NUMBER — CITY A STATE A ZIP CODE TELEPHONE NUMBER — CITY A STATE A	2		FEC ID number	C
Rame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC GROW THE MAJORITY Mailing Address 228 S WASHINGTON ST STE 115 ALEXANDRIA ALEXANDRIA CITY ▲ STATE ▲ ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TiTLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE Telephone Number	3.		FEC ID number	C
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC GROW THE MAJORITY Mailing Address 228 S WASHINGTON ST STE 115 ALEXANDRIA CITY ▲ STATE ▲ ZIP COI Connected Organization Affiliated Committee VA 22314 STATE ▲ ZIP COI Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TiTLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE Telephone Number — Telephone Number — Telephone Number — Optional Stanks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accountained bank, helpository, etc.	4.		FEC ID number	С
GROW THE MAJORITY Mailing Address 228 S WASHINGTON ST STE 115 ALEXANDRIA ALEXANDRIA CITY ▲ STATE ▲ ZIP COL Connected Organization Affiliated Committee Was Joint Fundraising Representative Leadership Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE Telephone Number Telephone Number Telephone Number Telephone Number Aganks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accountable accountable to the propository, etc.				
Mailing Address 228 S WASHINGTON ST STE 115 ALEXANDRIA ALEXANDRIA CITY ▲ STATE ▲ ZIP COL Connected Organization Affiliated Committee We joint Fundraising Representative Leadership Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE Telephone Number Telephone Number Telephone Number Telephone Number Aganks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accountable type of Bank, Depository, etc.	_		ndraising Representative	e, or Leadership PAC Spons
ALEXANDRIA ALEXANDRIA ALEXANDRIA CITY ▲ STATE ▲ ZIP CODE Connected Organization Affiliated Committee	GROW THE MAJOR	(II Y		
ALEXANDRIA ALEXANDRIA ALEXANDRIA Connected Organization Affiliated Committee Affil				
Relationship: CITY A STATE A ZIP COL Connected Organization Affiliated Committee Joint Fundraising Representative Leadership Pesignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION CITY A STATE A ZIP CODE Telephone Number Telephone Number Telephone Number Telephone Number Telephone Stanks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accourafety deposit boxes or maintains funds.	Mailing Address	228 S WASHINGTON ST STE 115		1 1 1 1 1 1 1 1 1 1
Relationship: CITY A STATE A ZIP COL Connected Organization Affiliated Committee Joint Fundraising Representative Leadership Leadership Resignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION CITY A STATE A ZIP CODE Telephone Number				
Connected Organization		ALEXANDRIA	VA	22314
resignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE Telephone Number Telephone Number Tanks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accourafety deposit boxes or maintains funds.	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE Telephone Number Telephone Number anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accourately deposit boxes or maintains funds. ame of Bank, epository, etc.	esignated Agent: Identi	ty by name, address (phone number – optional)		
Telephone Number		fy by name, address (phone number – optional)		1 1 1 1 1 1 1 1 1 1
Telephone Number Telephone Number Telephone Nu	Full Name	fy by name, address (phone number – optional)		
Telephone Number	Full Name	fy by name, address (phone number – optional)		
Telephone Number	Full Name	ty by name, address (phone number – optional)		
afety deposit boxes or maintains funds. lame of Bank, pepository, etc.	Full Name Mailing Address	CITY	STATE A	ZIP CODE A
l	Full Name	CITY A		ZIP CODE A
Mailing Address	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or management of Bank,	CITY ▲ Ories: List all banks or other depositories in white naintains funds.	Telephone Number	s funds, holds accounts, rent
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or make the second process of the second p	CITY ▲ Ories: List all banks or other depositories in white naintains funds.	Telephone Number	s funds, holds accounts, rent
<u> </u>	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or make the property of the position	CITY ▲ Ories: List all banks or other depositories in white naintains funds.	Telephone Number	s funds, holds accounts, rent
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or make the proposition of Bank, Depository, etc.	CITY ▲ Ories: List all banks or other depositories in white naintains funds.	Telephone Number	s funds, holds accounts, rent

Paga	of	13
Page	Oī	

1.						
				FEC ID	number	С
2				FEC ID	number	С
3.				FEC ID	number	С
4.				 FEC ID	number	С
	Any Connected (MORENO	Organization, Affili	iated Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spons
Ma	iling Address	P.O. BOX 34079	7			
		COLUMBUS			OH	43234
Rel	ationship:		CITY A		STATE A	ZIP CODE ▲
esignat	ed Agent: Identify	by name, address	(phone number – optior	nal)		
esignat Full N		by name, address	(phone number – option	aal)		
Full N		by name, address	(phone number – option	nal)		
Full N	Name	by name, address	(phone number – option	nal)		
Full N	Name	by name, address	(phone number – option	nal)		
Full N	Name		(phone number – option		STATE A	ZIP CODE A

Page	of 13	
rage	OI	

ected Organization, AMITTEE P.O. BOX 50 ARLINGTON Innected Organization	9	FEC FEC	C ID number	C C C c, or Leadership PAC Sp
P.O. BOX 50 ARLINGTON		FEC	C ID number C ID number Representative	C
P.O. BOX 50 ARLINGTON		FEC	Representative	C
P.O. BOX 50 ARLINGTON			Representative	
P.O. BOX 50 ARLINGTON		int Fundraising I		e, or Leadership PAC Sp
P.O. BOX 50 ARLINGTON		int Fundraising I		e, or Leadership PAC Sp
P.O. BOX 50	I			
ARLINGTON	I		VA I	
ARLINGTON	I			
ARLINGTON			l VA	
			ı VA ı	
nected Organization	CITY A			22216
nected Organization			STATE ▲	ZIP CODE 4
nected Organization		X Joint Fundrai		
TION ▼	CITY A		STATE ▲	ZIP CODE ▲
		Telephone	Number	
	SITION ▼ positories: List all bars or maintains funds.	positories: List all banks or other depositories	Telephone positories: List all banks or other depositories in which the com	Telephone Number positories: List all banks or other depositories in which the committee deposit

Page	of ¹³	
raue	OI .	

h). Joint Fundraisi	3		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representat	ive, or Leadership PAC Spons
NRSC VICTORY			
Mailing Address	228 S WASHINGTON ST		
	STE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE .	▲ ZIP CODE ▲
	Affiliated Committee Ty by name, address (phone number – option	Solution Fundraising Represe	ntative Leadership PAC Sp
		Solution Fundraising Represe	ntative Leadership PAC Sp
esignated Agent: Identi		Solution Fundraising Represe	ntative Leadership PAC Sp
esignated Agent: Identi		Solution Fundraising Represe	ntative Leadership PAC Sp
esignated Agent: Identi		Solution Fundraising Represe	ntative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optio	Solution Fundraising Represe	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optio	Joint Fundraising Represe	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – option of the control of the c	STATE A Telephone Number	ZIP CODE A
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 – option of the control of the c	STATE A Telephone Number	ZIP CODE A

Page	of 13	
rage	OI	

1							
1. 🔃				FEC II	number	С	
2. 🔟				FEC II	number	C	
3.				FEC II	number	С	Ξ
4.				FEC II	number	С	
				<u> </u>			
			ted Committee, Joint	Fundraising Rep	oresentative	e, or Leadership PAC S	pons
OHIO	VICTORY FUND	0 2024					
Mail	ing Address	228 S. WASHINGT	ON STREET				1 1
	3	SUITE 115					
		ALEXANDRIA		1	VA I	22314	
Rela	ationship:		CITY A		STATE A	ZIP CODE	<u> </u>
esignate	Connected			Joint Fundraising	Tioprosonia	ative Leadership PA	— —
esignate	ed Agent: Identify		phone number – option				
Full N	ed Agent: Identify						
Full N	ame						
Full N	ame						
Full N	ame	by name, address (p		nal)	STATE A	ZIP CODE A	

Page	of ¹³	
rage	OI	

1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
OHIO VICTORY CO	d Organization, Affiliated Committee, Joint Fur DMMITTEE 2024	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA VA	22314
		STATE A	ZIP CODE ▲
	ted Organization	oint Fundraising Represent	ative Leadership PAC Sp
Connected Agent: Identification of the Connected Agent: I	ted Organization Affiliated Committee X Jo		ative Leadership PAC Sp
Connected Agent: Identification	ted Organization Affiliated Committee X Jo		ative Leadership PAC Sp
Connected Agent: Identification of the Connected Agent: I	ted Organization Affiliated Committee X Jo		ative Leadership PAC Sp
Connected Agent: Identification of the Connected Agent: I	ted Organization Affiliated Committee X Journal Journal Affiliated Committee X Journal	oint Fundraising Representation	
Connected Agent: Identification of the Connected Agent: I	ted Organization Affiliated Committee X John Strategy of Strategy		Leadership PAC Sp