

FEC FORM 1

STATEMENT OF ORGANIZATION

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1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

OHIA JFC

ADDRESS (number and street)

228 S. Washington St., Ste. 115

(Check if address is changed)

Alexandria

CITY ▲

VA

STATE ▲

22314

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

llisker@hdafeec.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

10 / 23 / 2013

3. FEC IDENTIFICATION NUMBER ▶

C

4. 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 Lisa Lisker

Signature of Treasurer

Lisa Lisker *[Signature]*

Date

10 / 23 / 2013

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.

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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

13031133130

5. 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 candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State  District

- (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  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 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 separate segregated fund or party committee. (i.e., nonconnected committee)

- In addition, this committee is a Lobbyist/Registrant PAC.
- In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	PIONEER POLITICAL ACTION COMMITTEE	FEC ID number	C00325357
2.	FOR AMERICAS REPUBLICAN MAJORITY PAC (FARM PAC)	FEC ID number	C00409672
3.	_____	FEC ID number	C_____
4.	_____	FEC ID number	C_____

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Write or Type Committee Name

OHIA JFC

6. 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 Sponsor

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

Full Name Lisa Lisker

Mailing Address 228 S. Washington St., Ste. 115

Alexandria VA 22314

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 703 549 7705

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 Lisa Lisker

Mailing Address 228 S. Washington St., Ste. 115

Alexandria VA 22314

Title or Position Treasurer CITY STATE ZIP CODE

Treasurer Telephone number 703 549 7705

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Full Name of Designated Agent Keith Davis

Mailing Address 228 S. Washington St., Ste. 115

[Empty address line]

Alexandria VA 22314

CITY

STATE

ZIP CODE

Title or Position Assistant Treasurer Telephone number 703 - 549 - 7705

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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.

BB&T

Mailing Address 1909 K St., NW

[Empty address line]

Washington DC 20006

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty bank name line]

Mailing Address [Empty address line]

[Empty address line]

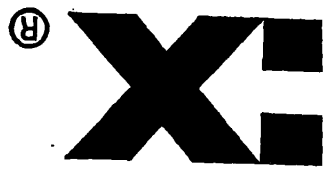
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CITY

STATE

ZIP CODE

13031133134



press

X-RAYED BY FCC SECURITY

Extremely Urgent

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2131 10 24

Page 1 of 1

From: (703) 549-7705  
Lisa Lisker  
Huckaby Davis Lisker  
228 S. Washington St., Ste. 115  
Alexandria, VA 22314

Origin ID: NDVA



SHIP TO: (202) 694-1139  
Public Records  
Federal Election Commission  
999 E St., NW

BILL SENDER

Ship Date: 23OCT13  
ActWgt: 0.3 LB  
CAD: 8587532INET3430

Delivery Address Bar Code



Ref # OHIA JFC  
Invoice #  
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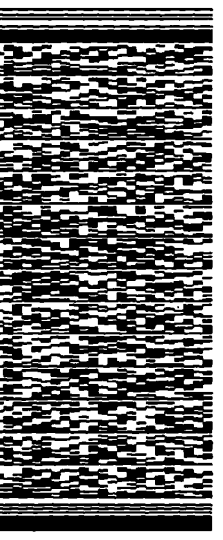
with the container and terms and conditions and applicable FedEx e current FedEx Service. Express services, is, go to [fedex.com](http://fedex.com), location.

Insert shipping

Washington, DC 20463

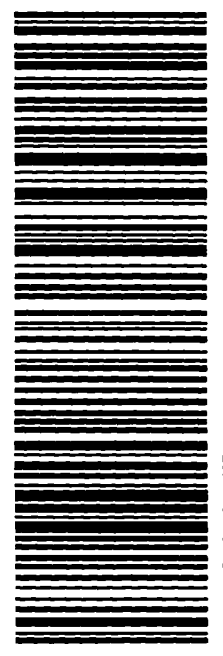
THU - 24 OCT 10:30A  
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed EXP</i>	Shipping Date <i>10/23/13</i>
Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JmW</i> PREPARER (8/2013)	<i>10/24/13</i> DATE PREPARED