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STATEMENT OF OPGANIZATION

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SECRETARY NOF THE SENATE
PUBLIC RECORDS

1 au 19, 91,

FORM 1		Ong	MINILA	ALION	16	JUN 30 P	M 15: 5#
NAME OF COMMITTEE (in	n full)	(Check is change		Example: If typing, type over the lines.	12FE4M5		
FRIENDS (OF JOH	IN MCCA	AIN ING				1
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	11.1.1.1.1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_!	1111	
ADDRESS (number a		228 S WASHING	STON STREE	T 			
(Check if		SUITE 115	1 1 1 1	<u> </u>	1 1 1	1 1 1 - 1	
is changed	a)	ALEXANDRIA 	1 1 1 1		VA STATE ▲	22314 ZIP	- L L L L
COMMITTEE'S E-M/	AIL ADDRESS	6					
(Check if is changed		salpurpura20	10@gmail				
		Optional Secono kdayis@hd	d E-Mail Add afec,com		<u> </u>	<u> </u>	
COMMITTEE'S WEE	address	RESS (URL)	nnmccain.com				
	6 27	2016					
3. FEC IDENTIFIC	CATION NUM	MBER ▶	C c	00540310			
4. IS THIS STATE	MENT	NEW (N)	OR	X 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	Keith A	. Davis				
Signature of Treasur	rer —	Ki H	1.	Sair.	Date 06	27	2016
NOTE: Submission of	f false, erroned	us, or incomplete	information	may subject the person signing to ON SHOULD BE REPORTED W	his Statement to	the penalties o	f 2 U.S.C. §437g.
Office Use				For further information of Federal Election Commission Toll Free 800-424-9530	ontact:	FEC F(-

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	FEC Fo	m 1 (Revised 02/2009)	Page 2
TYP	E OF C	OMMITTEE	
Car		Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below	<i>i.</i>)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Coinformation below.)	mplete the candidate
	ne of didate	JOHN S. MCCAIN	<u> </u>
	didate y Affiliati	on REP Office Sought: House Senate President	State AZ District 00
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Par	ty Con	nmittee:	***************************************
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization	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 committee. (i.e., nonconnected committee)	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.)	
Joir	nt Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised 02	2/2009)	Page 3
Write or Type Committee Name		
FRIENDS OF JO	OHN MCCAIN INC	
6. Name of Any Connected Or	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
BLUNT BURR MCCAIN	Y JOINT VICTORY COMMITTEE	11111
	228 S. Washington Street	
Mailing Address		
	Suite 115	
	Alexandria VA 22314	
	CITY STATE ZIP	CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Leader	ship PAC Sponsor
 Custodian of Records: Identification books and records. 	tify by name, address (phone number optional) and position of the person in posses	sion of committee
Salvatore A	A. Purpura	1
Full Name 111	228 S. Washington Street	
Mailing Address	Suite 115	
	Atexandria , VA , 22314	
	Alexandra Line Line Line Line Line Line Line Line	
Title or Position	CITY STATE ZIP	CODE
Assistant Treasurer	Telephone number 703 - 549	7705
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
Full Name Keith A. Da of Treasurer	avis 	<u> </u>
Mailing Address	228 S. Washington Street	
	Suite 115	
	Atexandria VA 22314 CITY STATE ZIF	CODE
Title or Position Treasurer	703 - 549 Telephone number	7705

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FEC Form 1 (Revised 02/2009)

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1S (Revised 0	96/2011)		Page 5
Banks or Other Depositories safety deposit boxes or mainta Name of Bank, Depository, etc	ns funds.	ittee deposits funds,	holds accounts, rents
BB&T			
			
Mailing Address	1909 K Street NW		
			لسسسبس
	Washington	ا لـٰـٰ	20006
	CITY 🙇	STATE 🚣	ZIP CODE 🛕
•	anization, Affiliated Committee, Joint Fundraising Rep	resentative, or Lea	[ADDITIONAL] adership PAC Sponsor
Mailing Address	228 S. Washington Street		ليبيبين
	Suite 115 Alexandria		
	CITY	STATE	ZIP CODE
Relationship: Connected Organization	Affiliated Committee	resentative L	eadership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name		11111	1 1 1 1 1 1 1 1 1 1
		-	
Mailing Address			
		- —	
Title or Position ♥	CITY 🌢	STATE	ZIP CODE
		ne number	
Joint Fundraiser Participant			[ADDITIONAL]
John Funuraiser Participant		<u></u>	
	FE FE	C ID number C	

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1S (Revised ()6/2011)		Page 6
Banks or Other Depositories safety deposit boxes or mainta Name of Bank, Depository, etc	ins funds.		ds accounts, rents
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Mailing Address	<u> </u>		
	<u> </u>	يا ليا لي	لبيبا-لبيبا
	CITY 🙇	STATE 4	ZIP CODE 🛕
	anization, Affiliated Committee, Joint Fundraisin MAJORITY COMMITTEE	g Representative, or Leader	[ADDITIONAL] ship PAC Sponsor
			ليستنسا
Mailing Address	PO BOX 1290		
	DRIPPING SPRINGS	TX 78	620
Relationship:	CITY	STATE .	ZIP CODE
Connected Organization	Affiliated Committee	g Representative	ership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name	<u> </u>	<u> </u>	
Mailing Address			
Title or Position	CITY 🏚	STATE	ZIP CODE
		elephone number	
Joint Fundraiser Participant			[ADDITIONAL]
1		FEC ID number C	
		1 20 10 Hember -	

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(103) 549-7705

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DANA K. MACCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232

United States Senate

OFFICE OF THE SECRETARY

PHONE(202) 224-0322

WASHINGTION, DC 20510-7116

OFFICE OF PUBLIC RECORDS

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