Only

## STATEMENT OF

PAGE 1/5

**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. We've Got a Country to Save 6500 Town Center Drive ADDRESS (number and street) Suite 1500 (Check if address is changed) Costa Mesa 92626 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS dsatterfield@hdafec.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00839373 FEC IDENTIFICATION NUMBER 3. 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. Satterfield, David, , , Type or Print Name of Treasurer Satterfield, David, , , [Electronically Filed] 05 2023 Signature of Treasurer Date 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 <b>2</b>
. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the cand	idate information below.)
(b) This committee is an authorized committee, and is NOT a principal car information below.)	npaign committee. (Complete the candidate
Name of Candidate	
Candidate Office Sought: House Se	nate President District
(c) This committee supports/opposes only one candidate, and is NOT an a	
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 organical contents of the connected organical contents or connected organical connected	nization on line 6.) Its connected organization is a:
Corporation Corporation w/o Capital	E .
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, an committee. (i.e., nonconnected committee)	nd is NOT a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify spo	nsor on line 6.)
(g) This committee is an independent expenditure-only political committee (	(Super PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	,
	contribution accounts (Hybrid PAC)
	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 d committees/organizations, at least one of which is an authorized comm	·
(j) This committee collects contributions, pays fundraising expenses and d committees/organizations, none of which is an authorized committee of	·
Committees Participating in Joint Fundraiser	
1.	C

	FEC Form 1 (Revised	02/2009)		Page <b>3</b>
۷	Vrite or Type Committee Nam	е		
	We've Got a C	Country to Save		
6.	Name of Any Connected Elder Victory Fund	Organization, Affiliated Committee, Joint Fundraising Represe	entative, or Leaders	ship PAC Sponsor
		_		
	Mailing Address	6500 Town Center Drive		
		Suite 1500		
		Costa Mesa	CA 92626	
		CITY ▲ ST	TATE ▲	ZIP CODE ▲
	Relationship: Connecte	d Organization Affiliated Organization X Joint Fundraising Re	epresentative	Leadership PAC Spons
7.	Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of th	ne person in possess	sion of committee
	Satterfield	d, David, , ,		
	Full Name			
	Mailing Address	228 S Washington Street		
		Suite 115		
		Alexandria	VA 22314	
	Title or Position ▼	CITY ▲ ST	TATE ▲	ZIP CODE ▲
	Treasurer	Telephone numbe	er 703 – _	549 - 7705
8.	Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the co assistant treasurer).	ommittee; and the na	ame and address of
	Full Name Satterfield of Treasurer	d, David, , ,		
	Mailing Address	228 S Washington Street		
		Suite 115		
		Alexandria	VA 22314	
	Title or Position —	CITY ▲ ST	TATE ▲	ZIP CODE ▲
	Title or Position ▼		700	540 7705

Telephone number

FEC Form 1 (Revised (	02/2009)		Page <b>4</b>
Full Name of Designated			
Agent			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position ▼			
		Telephone number	
Banks or Other Depositoric safety deposit boxes or main	es: List all banks or other depositories tains funds.	s in which the committee deposits	funds, holds accounts, rents
Name of Bank, Depository, e	etc.		
Chain E	Bridge Bank		
Mailing Address	1445A Laughlin Ave		
	McLean		22101
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Depository, 6	etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

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

FEC Form 1S (Revised 02/2017)

Page \_5 **of** 5\_\_\_

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	ELDER, LARRY, ,	<b>,</b>		
		220 2014 021 220 2014		
	Mailing Address	6500 TOWN CENTER DRIVE		
		SUITE 1500		
		COSTA MESA	CA	92626
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE <b>A</b>
8.	Full Name	CITY A	STATE A	ZIP CODE <b>A</b>
9.	Full Name Mailing Address  TITLE OR POSITION Banks or Other Depositor	CITY A  Tes: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address  TITLE OR POSITION	CITY A  Tes: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address  TITLE OR POSITION Banks or Other Depositor	CITY A  Tes: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address  TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY A  Tes: List all banks or other depositories in which	elephone Number	
	Full Name	CITY A  Tes: List all banks or other depositories in which	elephone Number	
	Full Name	CITY A  Tes: List all banks or other depositories in which	elephone Number	