

FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE  
2017 JAN -9 PM 4:27

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

Sedona PAC

228 S Washington Street, Suite 115

ADDRESS (number and street)

(Check if address is changed)

Alexandria

CITY ▲

VA

STATE ▲

22314

ZIP CODE ▲

2017 JAN 11 AM 9:33

RECEIVED  
FEDERAL ELECTION COMMISSION  
POSTAL REGISTRATION DIVISION

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

salpurpura2010@gmail.com

Optional Second E-Mail Address

kdavis@hdafec.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.johnmccain.com

2. DATE

01 / 01 / 2017

3. FEC IDENTIFICATION NUMBER

C 00540310

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

Keith Davis

Signature of Treasurer

*Keith A. Davis*

Date

01 / 01 / 2017

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 Use Only

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

FEC FORM 1  
(Revised 06/2012)

NON-FEDERAL ELECTION COMMISSION

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.	_____	FEC ID number	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

NON-FEDERAL GOVERNMENT

Write or Type Committee Name

Sedona PAC

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

Country First PAC, Inc. (Affiliated Committee)
Senator John McCain (Leadership PAC Sponsor)

Mailing Address 228 S Washington St, Suite 115
Alexandria VA 22314
CITY STATE ZIP CODE

Relationship: [ ] Connected Organization [X] Affiliated Committee [ ] Joint Fundraising Representative [X] 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 Salvatore Purpura
Mailing Address 228 S Washington St, Suite 115
Alexandria VA 22314
CITY STATE ZIP CODE

Title or Position Asst Treasurer Telephone number 704 - 668 - 1993

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 Keith Davis
Mailing Address 228 S Washington St, Suite 115
Alexandria VA 22314
CITY STATE ZIP CODE

Title or Position Treasurer Telephone number 703 - 549 - 7705

2007-01-11 09:11:00 AM

Full Name of Designated Agent

Salyatore Purpura

Mailing Address

228 S Washington St, Suite 115

Alexandria

CITY

VA

STATE

22314

ZIP CODE

Title or Position

Asst. Treasurer

Telephone number

704

668

1993

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 Bridge Bank

Mailing Address

1445-A Laughlin Ave

McLean

CITY

VA

STATE

22101

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

NON-PROFIT ORGANIZATION

