

STATEMENT OF

PAGE 1 / 4 = RECEIVED

FEC FORM 1		ORGANIZA		2018 OCT AM 9: 41 Office Use Only	
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Morrisey-M	iller Victor	y Fund	<u> </u>	·.	
	<u> </u>		<u> </u>		
ADDRESS (number a		S. Washington Street	<u> </u>	<u> </u>	لــــــــــــــــــــــــــــــــــــــ
☐ ◀ (Check if is changed	address Suite	e 115 Landria CITY 🛦		VA 22314 STATE A ZIP CODE A	
COMMITTEE'S E-MA	AIL ADDRESS				
(Check if is changed	d) <u> </u>	vis@hdafec.com			
	Optio	onal Second E-Mail Ad	dress		لــا
COMMITTEE'S WEE	address _I	(URL)			
	L				لــا
2. DATE	0 10 /	2018			
3. FEC IDENTIFIC	CATION NUMBE				
4. IS THIS STATE	MENT × N	IEW (N) OR	AMENDED (A	Α)	
I certify that I have	examined this Sta	ement and to the best	of my knowledge and bel	lief it is true, correct and complete.	
Type or Print Name	of Treasurer	Keith A. Davis	3		
Signature of Treasur	er <u> </u>	iHA.	Lan	Date 10 10 2018	Ϋ́Υ
NOTE: Submission of			may subject the person sign	ning this Statement to the penalties of 2 U.S.C. §- ED WITHIN 10 DAYS.	437g.

	ANY CHANGE	E IN INFORMATION SH	OULD BE REPORTED WITHIN 10 DAY	/S
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)

F	EC Fo	rm 1 (Revised 02/2009)	Page 2		
		ОММІТТЕЕ			
Can	didate	Committee:			
(a)	Ц	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 Candi					
Candi Party	idate Affiliati	Office Sought: House Senate President	State		
(c)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District		
Name Candi					
Part	y Con	nmittee:			
(d)		(National, State	(Democratic, Republican, etc.) Party.		
Polit	tical A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected 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 secommittee. (i.e., nonconnected committee)	gregated 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.)			
Joint	t Fund	raising Representative:			
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political		
	Com	mittees Participating in Joint Fundraiser			
	1.	MORRISEY FOR SENATE INC	651075		
	2.	CAROL FOR CONGRESS FEC ID number C C006	553220		
	3.		117063		
		NRCC COO	76020		

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FEC Form 1 (Revised 0	2/2009)	Page 3			
Write or Type Committee Name		1 age			
Morrisey-Miller Victory Fund					
	rganization, Affiliated Committee, Joint Fundraising Representati	ve, or Leadership PAC Sponsor			
NONE					
	<u> </u>				
	<u> </u>				
Mailing Address					
		l L			
	CITY STATE	ZIP CODE			
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor			
 Custodian of Records: Ider books and records. 	tify by name, address (phone number optional) and position of the	e person in possession of committee			
Davis, Keil	h A., , ,				
Full Name	228 S. Washington Street				
Mailing Address	Suite 115	<u> </u>			
	, VA	22314			
		J [
Title or Position	CITY STATE	ZIP CODE			
Treasurer	Telephone number	703 - 549 - 7705			
8. Treasurer : List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committed issistant treasurer).	tee; and the name and address of			
Full Name Davis, Keit of Treasurer	h A. ,,,				
Mailing Address	228 S. Washington Street				
	Suite 115				
	Alexandia VA CITY STATE	ZIP CODE			
Title or Position Treasurer	Telephone number	703 - 549 - 7705			

CITY

STATE

ZIP CODE

Mailing Address

(703) 549-7705

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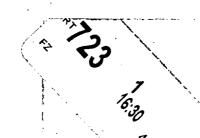
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DO The FEC added this page to the end of this filing to indicate how	
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Received from Electronic Filing Office	Date of Receipt
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and	10-11-18
PREPARER (3/2015)	DATE PREPARED