Image# 14978422325				10/16/2014 14 : 45
FEC FORM 1	STATEMEN ORGANIZ		Offic	PAGE 1 / 4
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	-
		over the lines.		
ADDRESS (number and street)	228 S WASHINGTON STREE	T		
(Check if address is changed)	SUITE 115			
is changed)			VA 2231	4
	CITY ▲		STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	kdavis@hdafec.com			
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
2. DATE 10 / 16	D / Y Y Y Y 2014			
3. FEC IDENTIFICATION NU	JMBER ► C co	00558056		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	nis Statement and to the best	of my knowledge and belief i	t is true, correct and o	complete.
Type or Print Name of Treasure	r Keith A. Davis			
Signature of Treasurer	A. Davis	[Electronically Filed]	Date	D D / Y Y Y Y 16 2014
NOTE: Submission of false, errone	eous, or incomplete information ANY CHANGE IN INFORMATION			enalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEC F	Form 1 (Revised 02/2009) Page 2
TYPE OF	COMMITTEE
Candida	te 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	L
Candidate Party Affilia	ation Office Sought: X House Senate President District 01
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee:
(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
	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 Fur	ndraising Representative:
(g) X	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.
Со	mmittees Participating in Joint Fundraiser
1.	MCSALLY FOR CONGRESS
2.	ANDY TOBIN FOR CONGRESS
3.	NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
4.	FEC ID number

I

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

MCSALLY TOBIN VICTORY COMMITTEE

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

Mailing Address				
	CITY		STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Com	nittee	g 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.

Keith A. Da	avis
Full Name	
Mailing Address	228 S. Washington Street
	Suite 115
	Alexandria VA 22314
Title or Position	CITY STATE ZIP CODE
Treasurer	703 549 7705 Telephone number 1 1

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 A. Davis
Mailing Address	228 S. Washington Street
	Suite 115
	Alexandria
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 703 549 7705

Full Name of Designated Agent	isa R. Lisker
Mailing Address	228 S. Washington Street
	Suite 115
	Alexandria VA 22314
	CITY STATE ZIP CODE
Title or Position Assistant Treasure	r Telephone number 703 - 549 - 7705

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 Street NW	
	Washington	
	CITY	STATE ZIP CODE
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE