

FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

16 OCT 31 PM 1:53

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

UNITED FOR A SENATE MAJORITY

ADDRESS (number and street)

3595 RR 620 SOUTH

(Check if address is changed)

STE 200

AUSTIN

CITY

TX

STATE

78738

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

COMPLIANCE@COMPLIANCECONSULTINGVA.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

10 / 31 / 2016

3. FEC IDENTIFICATION NUMBER

C00625913

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 HOBBS, CABELL, . . .

Signature of Treasurer

HOBBS, CABELL, . . .

*Cabell Hobbs*

Date

10 / 31 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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)

201611010200653327

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. FRIENDS OF KELLY AYOTTE INC \_\_\_\_\_ FEC ID number C C00464297
- 2. FRIENDS OF PAT TOOMEY \_\_\_\_\_ FEC ID number C C00461046
- 3. FRIENDS OF ROY BLUNT \_\_\_\_\_ FEC ID number C C00304758
- 4. GRASSLEY COMMITTEE INC \_\_\_\_\_ FEC ID number C C00230482

201611010200053729

Write or Type Committee Name

# UNITED FOR A SENATE MAJORITY

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising 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.

Full Name

SZATHMARY, CHRISTINE, . .

Mailing Address

PO BOX 341027

Title or Position

AUSTIN

TX

78734

CITY

STATE

ZIP CODE

ASSISTANT TREASURER

Telephone number

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

HOBBS, CABELL, . .

Mailing Address

PO BOX 341027

Title or Position  
TREASURER

AUSTIN

TX

78734

CITY

STATE

ZIP CODE

Telephone number

201611010200653329

Full Name of Designated Agent: SZATHMARY, CHRISTINE, . . .

Mailing Address: PO BOX 341027

AUSTIN TX 78734

CITY STATE ZIP CODE

Title or Position: ASSISTANT TREASURER

Telephone number: [ ] - [ ] - [ ]

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 BANK

Mailing Address: 2200 WILSON BLVD #200

ARLINGTON VA 22201

CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address: [ ]

[ ]

[ ]

CITY STATE ZIP CODE

201611010200053330

# FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1S (Revised 06/2011)

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**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.

[ ADDITIONAL ]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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

[ ADDITIONAL ]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ ADDITIONAL ]

Designated Agent

Full Name

Mailing Address

Title or Position ●

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ ADDITIONAL ]

5.

PORTMAN FOR SENATE COMMITTEE

FEC ID number

C C00458463

201611010200653331

# FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1S (Revised 06/2011)

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**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.

[ ADDITIONAL ]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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

[ ADDITIONAL ]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

Designated Agent

[ ADDITIONAL ]

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ ADDITIONAL ]

6.

THE RICHARD BURR COMMITTEE

FEC ID number

C C00385526

201611010200653332

Faxed  
or  
Hand Delivered

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 10/31/16  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE  NO POSTMARK

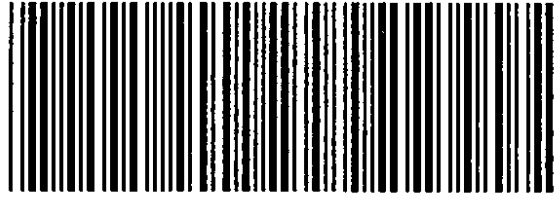
FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

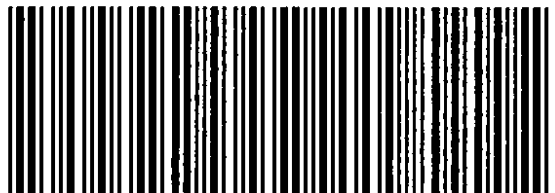
PREPARER DH DATE PREPARED 10-31-16

201611010200653334





SEN PATCH



SEN PATCH

201611010200653335