Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. DAVID SCOTT FOR CONGRESS P.O. BOX 960821 ADDRESS (number and street) (Check if address is changed) **RIVERDALE** 30296 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS davidscottforcongress@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) votedavidscott.com (Check if address is changed) DATE 2021 C00369801 FEC IDENTIFICATION NUMBER > 3. X 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. Scott, Alfredia, Aaron, , Type or Print Name of Treasurer Scott, Alfredia, Aaron, , [Electronically Filed] 01 2021 Signature of Treasurer Date 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 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 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information by	pelow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. information below.)	(Complete the candidate
Name of Candidate SCOTT, DAVID ALBERT, , ,	
Candidate Party Affiliation DEM Office Sought: House Senate President	State GA lent
	District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	tee.
Name of Candidate	
Party Committee:	
(Mational, 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 separ committee. (i.e., nonconnected committee)	rate segregated 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 Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, at least one of which is an authorized committee of a federal cand	·
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, none of which is an authorized committee of a federal candidate.	s for two or more political
Committees Participating in Joint Fundraiser	
1.	
2.	
3.	
4. FEC ID number C	

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Write or Type Committee Name	
DAVID SCOTT FOR CONGRESS	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE	
Mailing Address	
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the persor books and records. 	in possession of committee
Scott, Alfredia, Aaron, ,	
Full Name,PO Box 960821	
Mailing Address	
Riverdale GA 3	0296
Title or Position CITY STATE	ZIP CODE
Treasurer 404 Telephone number	_ 456 2971
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and any designated agent (e.g., assistant treasurer).	the name and address of
Full Name Scott, Alfredia, Aaron, , of Treasurer	
Mailing Address PO Box 960821	
Riverdale GA 36	0296
CITY STATE Title or Position	ZIP CODE
Treasurer 404 Telephone number	_ 456 _ 2971

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit boxes Name of Bank, Dep		
safety deposit boxes Name of Bank, Dep	s or maintains funds.	
safety deposit boxes Name of Bank, Dep	s or maintains funds. pository, etc. Suntrust Bank	
safety deposit boxes Name of Bank, Dep	s or maintains funds. pository, etc. Suntrust Bank	
safety deposit boxes Name of Bank, Dep	Suntrust Bank 225 Peachtree Street NE	ZIP CODE
safety deposit boxes Name of Bank, Dep	Suntrust Bank 225 Peachtree Street NE Atlanta CITY STATE	ZIP CODE
Safety deposit boxes Name of Bank, Dep Mailing Address Name of Bank, Dep	Suntrust Bank 225 Peachtree Street NE Atlanta CITY STATE Dository, etc.	ZIP CODE
Safety deposit boxes Name of Bank, Dep Mailing Address Name of Bank, Dep	Suntrust Bank 225 Peachtree Street NE Atlanta CITY STATE Wells Fargo Bank	ZIP CODE
Safety deposit boxes Name of Bank, Dep Mailing Address Name of Bank, Dep	Suntrust Bank 225 Peachtree Street NE Atlanta CITY STATE Dository, etc.	ZIP CODE
Safety deposit boxes Name of Bank, Dep Mailing Address Name of Bank, Dep	Suntrust Bank 225 Peachtree Street NE Atlanta CITY STATE Wells Fargo Bank	ZIP CODE
Safety deposit boxes Name of Bank, Dep Mailing Address Name of Bank, Dep	Suntrust Bank 225 Peachtree Street NE Atlanta CITY STATE Wells Fargo Bank	