Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) SCHWEIKERT VICTORY COMMITTEE PO Box 30844 ADDRESS (number and street) (Check if address is changed) Bethesda 20824 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@campaignfinancial.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00558262 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. Martin, Steven, , , Type or Print Name of Treasurer Martin, Steven, , , [Electronically Filed] 10 18 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

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		OMMITTEE .			
	didate	Committee:			
(a)	Ш	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. (Compinformation below.)	plete the candidate		
Name Cand					
Cand Party	idate Affiliatio	Office Sought: House Senate President	State		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District		
Name Cand					
Part	y Con	nmittee:			
(d)		· · ·	Democratic, Republican, etc.) Party.		
Poli	tical A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	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.			
<b>(f</b> )					
(f)	ш	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated lund or party		
		In addition, this committee is a Lobbyist/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Join	t Fund	raising Representative:			
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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 two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political		
	Committees Participating in Joint Fundraiser				
	1.	DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)	97594		
	2.	Friends of David Schweikert FEC ID number C C005	40617		
	3.	NRCC FEC ID number C C000	75820		
	4.				

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Write or Type Comm	iittee Name	
SCHWEIK	KERT VICTORY COMMITTEE	
6. Name of Any Co	onnected Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
		<u>                                     </u>
Mailing Address		
	CITY	7ID CODE
	CITY STATE	ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
<ul> <li>Custodian of Records</li> <li>books and records</li> </ul>	<b>cords:</b> Identify by name, address (phone number optional) and position of the person.	on in possession of committee
	CFS, Compliance, , ,	
Full Name	,PO Box 30844	
Mailing Address		
	Bethesda	,20824
	Betriesda	
Title or Position	CITY STATE	ZIP CODE
Custodian of Rec	cords 301   _   _   _   _   Telephone number	1   654   3220
	Telephone number	
3. <b>Treasurer:</b> List the	e name and address (phone number optional) of the treasurer of the committee; an jent (e.g., assistant treasurer).	nd the name and address of
	Martin, Steven, , ,	
Full Name of Treasurer		
Mailing Address	PO Box 30844	
	Bethesda   MD	20824
Title or Position	CITY STATE	ZIP CODE
Treasurer		
ı		,

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1 1
Banks or Other safety deposit be Name of Bank,		Is accounts, rents
safety deposit be	oxes or maintains funds.	s accounts, rents
safety deposit be Name of Bank,	Wells Fargo  7901 Wisconsin Avenue	zip code
safety deposit be Name of Bank,	Wells Fargo  7901 Wisconsin Avenue  Bethesda  CITY  STATE	
safety deposit be Name of Bank, Mailing Address	Wells Fargo  7901 Wisconsin Avenue  Bethesda  CITY  STATE	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Wells Fargo  7901 Wisconsin Avenue  Bethesda  CITY  STATE  Depository, etc.	
Safety deposit be Name of Bank, Mailing Address	Depository, etc.  Wells Fargo  7901 Wisconsin Avenue  Bethesda  CITY  STATE  Depository, etc.	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Wells Fargo  7901 Wisconsin Avenue  Bethesda  CITY  STATE  Depository, etc.	