**FEC** 

Only

# STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. FRIENDS OF DAVE MCCORMICK PO BOX 23537 ADDRESS (number and street) (Check if address is changed) **PITTSBURGH** 15222 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address KATIE@CROSBYOTT.COM is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00851980 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 TERRY, KATIE, , TERRY, KATIE, , , Date 04 26 2024 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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 information below.)	ie candidate
Name of Candidate MCCORMICK, DAVE, , ,	
Candidate Party Affiliation  REP  Office Sought: House  X Senate President	State PA  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 Republican	c, , etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
Corporation Corporation w/o Capital Stock Labor C	Organization
Membership Organization Trade Association Coopera	ative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid Programme)	4C).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) 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.	or more political
(j) 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.	or more political
Committees Participating in Joint Fundraiser	
1C	

	FEC Form 1 (Revised	02/2009)	
	Vrite or Type Committee Nam	·	- age •
		DAVE MCCORMICK	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
	2024 REPUBLICAN	I SENATE VICTORY	
	Mailing Address	228 S WASHINGTON STREET	
		SUITE 115	
		ALEXANDRIA	22314
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connecte	d Organization Affiliated Organization X Joint Fundraising Represen	tative Leadership PAC Sponso
7.	Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position of the perso	on in possession of committee
	TERRY, Full Name	KATIE, , ,	
	Mailing Address	PO BOX 23537	
		PITTSBURGH PA	15217
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	TREASURER	Telephone number	
8.	Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee, assistant treasurer).	e; and the name and address of
	Full Name TERRY, of Treasurer	KATIE, , ,	
	Mailing Address	PO BOX 23537	
		PITTSBURGH PA	15222
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	TREASURER		

Telephone number

FEC Form 1	(Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
Title or Position ■	CITY ▲ STATE ▲	ZIP CODE ▲
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits es or maintains funds.	funds, holds accounts, rents
Name of Bank, D	epository, etc.	
	CHAIN BRIDGE BANK	
Mailing Address	1445-A LAUGHLIN AVE	
	MCLEAN VA	22101
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
	EAGLEBANK	
Mailing Address	7830 OLD GEORGETOWN ROAD	
	BETHESDA	20814
	CITY ▲ STATE ▲	ZIP CODE ▲

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	. or Leadership PAC Spons
BATTLEFIELD FUN			, or
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and mailing a	CITY ▲  CITY ▲  Pries: List all banks or other depositories in which aintains funds.  MARSHALL BANK  1625 K STREET NW	elephone Number	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY   CITY   CITY    Pries: List all banks or other depositories in which aintains funds.  MARSHALL BANK   [1625 K STREET NW]  SUITE 1050	Telephone Number	s funds, holds accounts, rent
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  Pries: List all banks or other depositories in which aintains funds.  MARSHALL BANK  1625 K STREET NW	elephone Number	

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	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 13026		
	AUSTIN	TX	78711
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds.	Telephone Numberh the committee deposits	s funds, holds accounts, rent
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds.	Telephone Numberh the committee deposits	s funds, holds accounts, rent
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds.	Telephone Numberh the committee deposits	s funds, holds accounts, rent

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1.						
				FEC ID	number	С
2				FEC ID	number	С
3				FEC ID	number	С
4				FEC ID	number	С
	_	_	ated Committee, Joint		esentative	, or Leadership PAC Spons
Mai	iling Address	PO BOX 9891				
			1 1 1 1 1 1 1			
		ARLINGTON			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	22219
Rela	ationship:		CITY A	:	STATE A	ZIP CODE ▲
esignate	ed Agent: Identify	by name, address	(phone number – option	nal)		
<b>Pesignat</b> Full N		by name, address	(phone number – option	nal)		
Full N		by name, address	(phone number – option	nal)		
Full N	Name	by name, address	(phone number – option	nal)		
Full N	Name	by name, address	(phone number – option	nal)		
Full N	Name		(phone number – option		TATE A	ZIP CODE A

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ny Connected O	rganization, Affiliated Committee	FEC FEC	C ID number C ID number C ID number C ID number	C C C
_	rganization, Affiliated Committee	FEC	ID number	С
_	rganization, Affiliated Committee	FEC		
_	rganization, Affiliated Committee		ID number	С
_	rganization, Affiliated Committee			
_	rganization, Affiliated Committee			
		e, Joint Fundraising	Representative	e, or Leadership PAC Spon
	RITY			
	ı 421 OFFICE PARK DR			
g Address				
	MOUNTAIN BROOK		AL	35223
onship:	CITY ▲		STATE ▲	ZIP CODE ▲
me				
Address				
OR POSITION <b>T</b>	CITY A		STATE ▲	ZIP CODE ▲
		Telephone	Number	
•	Agent: Identify by the Address	MOUNTAIN BROOK  onship: CITY ▲  Connected Organization Affiliated Committ  Agent: Identify by name, address (phone number me  Address  OR POSITION ▼  CITY ▲	MOUNTAIN BROOK  onship:  Connected Organization  Affiliated Committee  X Joint Fundrai  Agent: Identify by name, address (phone number – optional)  me  Address  CITY ▲  CITY ▲	MOUNTAIN BROOK onship:  CITY ▲  STATE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representation  Agent: Identify by name, address (phone number – optional)  me  Address  CITY ▲  STATE ▲  STATE ▲  OR POSITION ▼

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h). <b>Joint Fundraisi</b>	ig i articipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected SENATE PATH TO	Organization, Affiliated Committee, Joint Fundal	draising Representative	e, or Leadership PAC Spons
Mailing Address	421 OFFICE PARK DR		
	MOUNTAIN BROOK	AL	35223
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Jointy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY    pries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY    pries: List all banks or other depositories in whice aintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY    pries: List all banks or other depositories in whice aintains funds.	STATE A  Telephone Number	ZIP CODE A

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h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
TEAM MCCORMICH	<b>(</b> 		
Mailing Address	PO BOX 23537		
	1		
	PITTSBURGH	PA	15222
Relationship:	CITY A	STATE A	ZIP CODE ▲
	ed Organization Affiliated Committee X	oint Fundraising Represent	tative Leadership PAC Sr
Connecte	ed Organization Affiliated Committee X	loint Fundraising Represent	tative Leadership PAC Sp
Connecte			tative Leadership PAC Sp
Connecte esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional		Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional  CITY   CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or market	fy by name, address (phone number – optional  CITY   CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional  CITY   CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional  CITY   CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional  CITY   CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional  CITY   CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A