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) is changed) over the lines. Elder for President 24 6500 Town Center Drive ADDRESS (number and street) Suite 1500 (Check if address is changed) Costa Mesa 92626 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS dsatterfield@hdafec.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.LarryElder.com (Check if address is changed) DATE 2023 C00839365 FEC IDENTIFICATION NUMBER > 3. 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. Satterfield, David, , , Type or Print Name of Treasurer Satterfield, David, , , [Electronically Filed] 05 2023 Signature of Treasurer Date 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

Toll Free 800-424-9530 Local 202-694-1100

(Revised 06/2012)

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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 Elder, Larry, , ,							
Candidate Party Affiliation REP Sought: House Senate President	State t District						
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.							
Name of Candidate							
Party Committee:							
(National, State (Den	nocratic, ublican, etc.) Party						
Political Action Committee (PAC):							
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is a:						
Corporation Corporation w/o Capital Stock	abor Organization						
Membership Organization Trade Association C	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 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.)							
(g) This committee is an independent expenditure-only political committee (Super PAC). In addition, this committee is a Lobbyist/Registrant PAC.							
					This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).		
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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	· ·						
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							

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٧	Vrite or Type Committee Name					
	Elder for Presid	dent 24				
6.	Name of Any Connected Or	rganization, Affiliated Co	mmittee, Joint	Fundraising Represen	ntative, or Leader	ship PAC Sponsor
	Elder Victory Fund					
		16500 Town Center Drive				
	Mailing Address	Suite 1500				
		Costa Mesa			CA 92626	
					92020	
		C	CITY A	STA	ATE A	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated	Organization	¥ Joint Fundraising Rep	oresentative	Leadership PAC Spons
7.	Custodian of Records: Identi books and records.	ify by name, address (phon	ne number opti	onal) and position of the	e person in possess	sion of committee
	Satterfield,	David, , ,				
	Full Name					
	Mailing Address	228 S Washington Street				
		Suite 115				
		Alexandria			/A 22314	
			CITY A	STA	ATE A	ZIP CODE ▲
	Title or Position ▼					
	Treasurer			Telephone number	703	549 - 7705
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 Satterfield,	David, , ,				
	of Treasurer					
	Mailing Address	228 S Washington Street				
		Suite 115				
		Alexandria			VA 22314	
		C	CITY A	STA	ATE A	ZIP CODE ▲
	Title or Position ▼					
	Treasurer			Telephone number	703	549 - 7705

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Full Name of Designated								
Agent								
Mailing Address								
	CITY ▲	STATE ▲	ZIP CODE ▲					
Title or Position ▼								
		Telephone number						
Banks or Other Depositoric safety deposit boxes or main	es: List all banks or other depositories tains funds.	s in which the committee deposits	funds, holds accounts, rents					
Name of Bank, Depository, e	Name of Bank, Depository, etc.							
Chain Bridge Bank								
Mailing Address	1445A Laughlin Ave							
	McLean		22101					
	CITY ▲	STATE ▲	ZIP CODE ▲					
Name of Bank, Depository, etc.								
Mailing Address								
	CITY ▲	STATE ▲	ZIP CODE ▲					