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STATEMENT OF

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THE SEMATE

17.400

FEC FORM 1	ı	ORGANIZ	ATION		1/APR 24 PH 3: 27 Office Use Only
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Bartos for	Senate	e, Inc.	1111111		
			<u> </u>		
ADDRESS (number a	ind street)	239 Winding	Way		
(Check if a is changed		Merion Station	n	PA	19066
			CITY	STATE	ZIP CODE
COMMITTEE'S E-M/ (Check if is change	address	SS (Please provide only one or treasurer@je			
COMMITTEE'S WEE	address	oress (URL) www.jeffbarto	os.com	<u> </u>	
2. DATE 0	4"] / 24	2017			
3. FEC IDENTIF	CATION N	JMBER C			
4. IS THIS STATE	MENT X	NEW (N) OR	AMENDED (A)		
Type or Print Name	of Treasure rer f false, errone	David Satter	ul	Date O4	and complete.
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

Pac	e	2

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate infor	rmation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign coinformation below.)	ommittee. (Complete the candidate
Name of Candidate Jeffrey A. Bartos	
Candidate REP Office Sought: House Senate	State PA President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized	d committee.
Name of Candidate	
Party Committee:	(Democratic,
(d) This committee is a (National, State or subordinate) committee of the	Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization of	on line 6.) Its connected organization is a
Corporation Corporation w/o Capital Stoc	k 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 NC committee. (i.e., nonconnected committee)	OT a separate 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 of	6.)
Joint Fundraising Representative:	
(9) This committee collects contributions, pays fundraising expenses and disburses n committees/organizations, at least one of which is an authorized committee of a fe	ederal carloisers.
(h) This committee collects contributions, pays fundraising expenses and disburses no committees/organizations, none of which is an authorized committee of a federal of	et proceeds for two or more political candidate.
Committees Participating in Joint Fundraiser	151
1. FEC ID nu	in the second se
2. FEC ID nu	mber C
3. FEC ID nu	umber_C
	imper · C

1		
FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	e	
Bartos for Senat	te, Inc.	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
Mono		
None		
Mailing Address		
	CITY STATE ZI	P CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Leade	ership PAC Sponsor
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in posse	ssion of committee
Full Name David	l Satterfield	
	228 Şouth Washington Ştreet, Şuite 115	
Mailing Address		
	Alexandria	1111
	/ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u></u>
Title or Position	CITY STATE ZI	P CODE
Treasurer	Telephone number	
Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
Full Name of Treasurer David	d Satterfield	1 1 1 1 1 1
Mailing Address	228 South Washington Street, Suite 115	
	Alexandria VA 122314	. 1-1
		P CODE
Title or Position	Telephone number	. -

_	FEC For	m 1 (Revised	3 02/2009)		Page 4
					
(Full Name of Designated Agent	ــــــــــــــــــــــــــــــــــــــ		<u> </u>	_ L_l_l_l_l_l_l_l_l_
ı	Mailing Address			<u> </u>	
				1 1 1 1 1	
			CITY	STATE	ZIP CODE
7	Title or Position				
l		1 1 1 1	Telephone nu	ımber	
:	Banks or Other safety deposit b Name of Bank,	oxes or main		ittee deposits	funds, holds accounts, rents
		BB&T	<u> </u>		
ı	Mailing Address		[300 South Washington,Street		
	_				
			A exandria	VA I	22314, - , ,
			CITY	STATE	ZIP CODE
	N (D)	Depository, e	etc.		
ı	Name of Bank,				
1	Name of Bank,	ــــــــا	<u> </u>	<u> </u>	<u> </u>
	Name of Bank, Mailing Address	ســــــــــــــــــــــــــــــــــــــ			
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		ســــــــــــــــــــــــــــــــــــــ		STATE	ZIP CODE

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DANA K MACTALLUM, SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 23.2

United States Senate

OFFICE OF THE SECRETARY

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PHONE(202) 224-0322

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