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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. Isakson Leadership Committee 6065 Roswell Road ADDRESS (number and street) #2274 (Check if address is changed) Atlanta 30328 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kdavis@hdafec.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2016 C00586834 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. Jon F. Anderson Type or Print Name of Treasurer Jon F. Anderson [Electronically Filed] 02 08 2016 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 Only

Local 202-694-1100

F	EC Fo	rm 1 (Revised 02/2009)	Page 2				
		OMMITTEE					
Can	didate	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.)	lete the candidate				
Name Cand							
Cand Party	lidate 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)		The state of the s	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 connected organization on line 6.	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.	•				
(f)	П	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party					
		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.)					
Join	t Fund	raising Representative:					
(g)	X	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.	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.	GEORGIANS FOR ISAKSON	84693				
	2.	21ST CENTURY MAJORITY FUND FEC ID number C C003	61956				
	3.	FEC ID number					
	4.						

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Write or Type Committee Name						
Isakson Leadership Committee						
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor					
NONE						
Mailing Address						
	. -					
CITY STATE ZIF	CODE					
	makia DAO Carana					
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leade	rship PAC Sponsor					
7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in posses books and records. Stephanie Jones	ssion of committee					
Full Name,6065 Roswell Road						
Mailing Address						
Atlanta GA 30328						
Title or Position CITY STATE ZIF	CODE					
Designated Agent Telephone number						
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	and address of					
Full Name Jon F. Anderson						
of Treasurer 4287 Bristlecone Drive NW						
Mailing Address						
Marietta GA 30064	I-I , , , I					
CITY STATE ZIP Title or Position	CODE					

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Full Name of Designated Agent	Keith A. Davis		1	
Mailing Address	228 S. Washington Str	reet		
	Suite 115			
	Alexandria	CITY	VA 22314 STATE	ZIP CODE
Title or Position Assistant Treasu	rer	Telephone nu	mber	549 - 7705
Banks or Other safety deposit bo Name of Bank, D	tes or maintains funds.	ner depositories in which the commi	ttee deposits funds, hok	ds accounts, rents
			property and the contract of	1 1 1 1 1 1 1 1
Mailing Address	1909 K Street NW			
Mailing Address	1909 K Street NW			
Mailing Address	1909 K Street NW Washington		DC 20006	
Mailing Address		CITY	DC 20006 STATE	ZIP CODE
Mailing Address Name of Bank, D	Washington	CITY		ZIP CODE
	Washington	CITY		ZIP CODE
	Washington	CITY		ZIP CODE
Name of Bank, D	Washington	CITY		ZIP CODE
Name of Bank, D	Washington	CITY		ZIP CODE