Only

PAGE 1 / 10 -

FEC FORM 1		ORGA							Office	e Use O	nlv		-
1. NAME OF COMMITTEE (ir	n full)	(Check if is change		Example over the	e:If typing, typ lines.	ре	12FE	24M5			,		
Monica for	Cong	ress	1 1 1 1	1 1 1	1 1 1 1 1		1 1		1 1	1 1	1 1	l I	
ADDRESS (number a	nd street)	1317 W Frontage	Rd										
(Check if a is changed		Ste A											
is changed	4)	Alamo CITY A					TX STATE	_	78516		- IP CC	DDE 🛦	
COMMITTEE'S E-MA	AIL ADDRI	ESS											
(Check if a is changed		info@monicaf	orcongres	s.us									
io onanget	-,	Optional Second	E-Mail Addre	ess om		1 1 1	1 1			1 1			
☐ ◀ (Check if a is changed													
2. DATE 09		D / Y Y Y Y Y 2022	Y										
3. FEC IDENTIFIC	CATION N	UMBER ▶	C coo	765719									
4. IS THIS STATEM	MENT	NEW (N)	OR	×	AMENDED	(A)							
I certify that I have e	examined	his Statement and to	the best of	f my know	ledge and be	elief it is	true, c	orrect	and co	omplete	∍.		
Type or Print Name	of Treasure	er Satterfield, David,	, ,										
Signature of Treasure	er Satte	rfield, David, , ,		[Ele	ctronically File	<i>d]</i> D	ate	09	/	06	/ [202	2
NOTE: Submission of	false, error	neous, or incomplete in		-						nalties	of 52	U.S.C	. §30109
Office Use				Fed	further informateral Election Co	mmission	act:			EC F			

Toll Free 800-424-9530

Local 202-694-1100

E	C Form 1 (Revised 03/2022)	Page 2
	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 car information below.)	ndidate
	Name of Candidate De La Cruz, Monica, , ,	
	Party Affiliation REP Sought: * House Senate President	State TX
	(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, etc.)	Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	janization is a:
	Corporation Corporation w/o Capital Stock Labor Organi	zation
	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 NOT a separate segregated fun committee. (i.e., nonconnected committee)	d 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 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 two or mo committees/organizations, at least one of which is an authorized committee of a federal candidate.	re political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mo-committees/organizations, none of which is an authorized committee of a federal candidate.	re political
	Committees Participating in Joint Fundraiser	
	1. C	

I	FEC Form 1 (Rev	rised 02/2009)	Page 3
٧	Vrite or Type Committee		
	Monica for (
6.		eted Organization, Affiliated Committee, Joint Fundraising Representative Winning Women 2022	ve, or Leadership PAC Sponsor
	I fielius of GOP		
	Mailing Address	228 S Washington St	
		Ste 115	
		Alexandria	22314-5404
		CITY ▲ STATE 4	▲ ZIP CODE ▲
	Relationship: Conr	nected Organization Affiliated Organization X Joint Fundraising Represe	entative Leadership PAC Sponso
7.	Custodian of Records: books and records.	: Identify by name, address (phone number optional) and position of the pers	son in possession of committee
	Satte	erfield, David, , ,	
	Full Name		
	Mailing Address	228 S Washington Street	
		Suite 115	
		Alexandria	22314-5404
		CITY ▲ STATE 4	▲ ZIP CODE ▲
	Title or Position ▼	5	002_
	Custodian of Records	Telephone number	703 - 549 - 7705
8.		me and address (phone number optional) of the treasurer of the committed (e.g., assistant treasurer).	ee; and the name and address of
	1 4 1 14	erfield, David, , ,	
	of Treasurer	200 2 W 1 : 1 2 2 : 1	
	Mailing Address	228 S Washington Street	
		Suite 115	
		Alexandria	22314-5404
		CITY ▲ STATE 4	▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	703 - 549 - 7705

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Full Name of Designated Agent		
Mailing Address		
Title on Decition =	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position		
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds, have or maintains funds.	nolds accounts, rents
Name of Bank, D	epository, etc.	
	Chain Bridge Bank	
Mailing Address	1445-A Laughlin Ave	
	McLean VA 221	01
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
	Classic City Bank	
Mailing Address	2365 W Broad St	
	Athens GA 306	06
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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5(g)	or(h). Joint Fundraisin	g Participant:			
	1		FEC	ID number	C
	2.		FEC	ID number	C
	3.		FEC	ID number	C
	4.		FEC	ID number	C
6.		Organization, Affiliated Committee, Joint Victory Committee 2022	Fundraising R	epresentative	e, or Leadership PAC Sponsor
	Mailing Address	228 S Washington St			
		Ste 115			
		Alexandria		_ ∨A 	22314-5404
	Relationship:	CITY A	_	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Joint Fundrais	ing Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	y by name, address (phone number – option	nal)		
	Mailing Address				
	Ü				
				1 1	
	TITLE OF POOLTION	_ CITY ▲		STATE ▲	ZIP CODE A
	TITLE OR POSITION		Telephone	Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in valuations funds. etown Valley Bank 24 W Main Street PO Box 75 Middletown	which the comm	mittee deposit	s funds, holds accounts, rents
		CITY ▲		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi r	1	FEC ID number	C
1.			
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
De La Cruz For T	x-15		
Mailing Address	PO Box 30844		
	Bethesda	MD	20824-0844
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
Pesignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
Pesignated Agent: Identif	y by name, address (phone number – optional) CITY		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or mailing and propositions. Jame of Bank, Pepository, etc.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page ____ **of** ____

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.	Name of Any Connected Team Monica Vict	Organization, Affiliated Committee, Joint Fundrai	ising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	228 S Washington St		
		Ste 115		
		Alexandria	VA	22314-5404
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
		QITY :	OTATE A	710 0005 +
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	ephone Number	
9.	Name of Bank, Wells	ries: List all banks or other depositories in which that intains funds. Fargo Bank	ne committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	aintains funds.	ne committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Wells	aintains funds. Fargo Bank	ne committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	Fargo Bank 8302 Woodmont Avenue		
9.	Name of Bank, Depository, etc.	aintains funds. Fargo Bank	ne committee deposit	s funds, holds accounts, rents

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1.			
		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected Take Back The H	Organization, Affiliated Committee, Joint I	Fundraising Representati	ve, or Leadership PAC Spon
Mailing Address	PO Box 30844		
	Bethesda	MD	20824-0844
Relationship:	CITY A	STATE A	XIP CODE ▲
coignated Agent. Identin	y by name, address (phone number - option	al)	
Full Name	y by name, address (phone number – option	al)	
	y by name, address (phone number – option	al)	
Full Name	y by name, address (phone number – option	al)	
Full Name	y by name, address (phone number – option	al)	
Full Name	CITY A	al) STATE	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mailane of Bank,	CITY A	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito afety deposit boxes or mail ame of Bank, Depository, etc.	CITY A	STATE A Telephone Number	

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5(a)	or(h). Joint Fundraisin	g Participant:		
- (3)	1.	, , , , , , , , , , , , , , , , , , <u>, </u>	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4			
6.	Name of Any Connected Just Win Baby Vic	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
		824 Milledge Cir		
	Mailing Address			
		Ste 101		
		Athens	GA GA	30606-
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sponsor
8.		by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	3			
	3			
	3			
		CITY A	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	•	STATE A	ZIP CODE A
9.	TITLE OR POSITION	ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which	elephone Number	

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5(g)	or(h). Joint Fundraisin	ng Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	Cruz 25 For 22 Vi	ictory Fund		
		PO Box 341027		
	Mailing Address	FO BOX 341027		
		Austin	TX TX	78734-0018
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank,	CITY A Te pries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail	CITY A Te pries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank,	CITY A Te pries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main safety depository, etc.	CITY A Te pries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main safety depository, etc.	CITY A Te pries: List all banks or other depositories in which	elephone Number	