FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

14 JUN 16 PM 1: 48

Office Use Only

1. NAME OF COMMITTEE (in full)   ☐ (Check if name is changed)   Example: If typing, type over the lines.

`12FE4M5`

McFadden Senate Victory Committee

ADDRESS (number and street)

☐ ◄ (Check if address is changed)

228 S. Washington Street

Suite 115

Alexandria

CITY ▲

VA
STATE ▲

22314
ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ ◄ (Check if address is changed)

kdavis@hdafec.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ ◄ (Check if address is changed)

2. DATE   06 / 11 / 2014

3. FEC IDENTIFICATION NUMBER ▶   C

4. 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.

Type or Print Name of Treasurer   Keith A. Davis

Signature of Treasurer _____   Date   06 / 11 / 2014

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 Use Only

For further Information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

5. 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

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Candidate Party Affiliation	☐	Office Sought:	☐ House	☐ Senate	☐ President	State ☐
						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 ☐ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

(e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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) ☐ 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.)

Joint Fundraising Representative:

(g) ☒ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h) ☐ 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. MCFADDEN FOR SENATE | FEC ID number C C00545921

2. NATIONAL REPUBLICAN SENATORIAL COMMITTEE | FEC ID number C C00027466

3. | FEC ID number C

4. | FEC ID number C

14020414762

Write or Type Committee Name

McFadden Senate Victory Committee

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY   STATE   ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

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7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name: Keith A. Davis

Mailing Address: 228 S. Washington Street

Suite 115

Alexandria   VA   22314

Title or Position   CITY   STATE   ZIP CODE

Treasurer

Telephone number: 703 - 549 - 7705

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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 of Treasurer: Keith A. Davis

Mailing Address: 228 S. Washington Street

Suite 115

Alexandria   VA   22314

CITY   STATE   ZIP CODE

Title or Position
Treasurer

Telephone number: 703 - 549 - 7705

Full Name of
Designated   Lisa R. Lisker
Agent

Mailing Address   228 S. Washington Street

                 Suite 115

                 Alexandria   VA   22314   –
                                 CITY   STATE   ZIP CODE

Title or Position
Assistant Treasurer   Telephone number   703 – 549 – 7705

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9. **Banks or Other Depositories**: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BB&T

Mailing Address   1909 K Street NW

                 Washington   DC   20006   –
                                 CITY   STATE   ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

                                 CITY   STATE   ZIP CODE

U.S. SENATE
TRACKING NUMBER
13-035389

Extremely Urgent

RT 702 1
FZ B04

7354
06.12

Ship Date: 11JUN14
ActWgt: 0.1 LB
CAD: 104315141/INET3490

Delivery Address Bar Code

Ref #
Invoice #   McFadden Senate Victory
PO #
Dept #

Received by
Senate Post Office 24

JUN 12 2014

MON - 16 JUN AA
EXPRESS SAVER
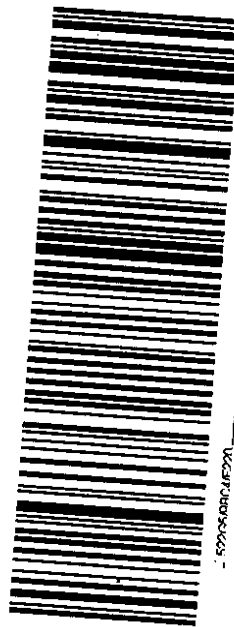
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TRK# 7702 7482 7354
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FedEx Express E

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From: (703) 549-7705
Keith Davis
Huckaby Davis Lister
228 S Washington St
Ste 115
Alexandria, VA 22314

SHIP TO: (202) 224-0758   BILL SENDER
Office of Secretary of the Senate
Office of Secretary of the Senate
232 Hart Senate Building

Washington, DC 20510

Express

NA K. MCCALLUM
SUPERINTENDENT

HART SATE OFFICE BL
SUITE 232
WASHINGTON, DC 20510-71
PHONE (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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Date of Receipt

USPS FIRST CLASS MAIL _____
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USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL_____
Postmark

OVERNIGHT DELIVERY SERVICE:
SHIPPING DATE   NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS   **6-11-14**   ☐

UPS   _____   ☐

DBL   _____   ☐

AIRBORNE EXPRESS   _____   ☐

RECEIVED FROM FEDERAL ELECTION COMMISSION_____
Date of Receipt

POSTMARK ILLEGIBLE ☐   NO POSTMARK ☐

FAX_____
Date of Receipt

OTHER_____
Date of Receipt or Postmark

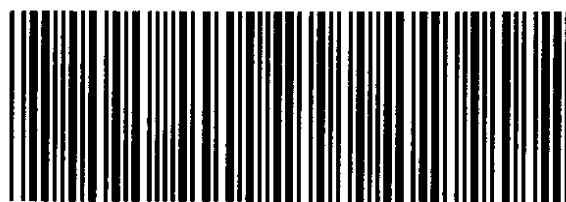PREPARER **DH**   DATE PREPARED **6-16-14**

SEN PATCH

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