Image# 201605109015398774				05/10/2010 14.50
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4 —
				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Ayotte Victory C				
	228 S. Washington Street			
ADDRESS (number and street)	Suite 115			
(Check if address is changed)				
	Alexandria			2314
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDF	RESS			
(Check if address	kdavis@hdafec.com			
is changed)	Optional Second E-Mail Ad	drogo		
(Check if address is changed)				
	10 ⁷ Y Y Y Y 2016			
3. FEC IDENTIFICATION I	NUMBER ► C C	00572354		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
certify that I have examined	this Statement and to the best	of my knowledge and belief i	t is true, correct ar	nd complete.
Type or Print Name of Treasu	rer Keith A. Davis			
			M	
Signature of Treasurer	th A. Davis	[Electronically Filed]	Date 05	10 2016
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED V		e penalties of 2 U.S.C. §437g
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYPE OF	COMMITTEE
Candida	te 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	L
Candidate Party Affilia	ation Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee:
(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
	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 Fur	ndraising Representative:
^(g) X	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.
Co	mmittees Participating in Joint Fundraiser
1.	FRIENDS OF KELLY AYOTTE FEC ID number C C00464297
2.	NRSC
3.	KELLY PAC
4.	NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

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Write or Type Committee Name

Ayotte Victory Committee

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

Mailing Address										
	STATE ZIP C	CODE								
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor										

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

Keith A. Da	avis
Full Name	
Mailing Address	228 S. Washington Street
	Suite 115
	Alexandria VA 22314 Image: I
Title or Position	CITY STATE ZIP CODE
Treasurer	703 549 7705 Telephone number 1 1

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
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 703 549 7705

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Full Name of Designated Agent	Lisa R. Lisker	
Mailing Address	228 S. Washington Street	
	Suite 115	
	Alexandria VA 22314	
	CITY STATE ZIP CODE	
Title or Position	rer Telephone number 7035497705	

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					1														
		Washin	gton												20	006	;			· [
					CITY	(STA	ΑΤΕ				2	ZIP	COI	DE			
Name of Bank, De	epository, e	tc.																					
Mailing Address																							
					CITY	1						STA	λΤΕ				2	ZIP	COI	DE			