FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Montenegro for Congress P.O. Box 2275 ADDRESS (number and street) (Check if address is changed) Litchfield Park 85340 ΑZ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dsatterfield@hdafec.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.stevemontenegro.com (Check if address is changed) DATE 04 2018 C00664813 FEC IDENTIFICATION NUMBER > 3. 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. Satterfield, David, , , Type or Print Name of Treasurer Satterfield, David, , , [Electronically Filed] 01 2018 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

Local 202-694-1100

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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. (Cominformation below.)	plete the candidate
Name of Candidate Montenegro, Steve, , ,	
Candidate Party Affiliation REP Office Sought: House Senate President	State AZ District 08
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	_
	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected 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 se committee. (i.e., nonconnected committee)	egregated fund or party
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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo or more political
Committees Participating in Joint Fundraiser	
1. FEC ID number	
2.	
3. FEC ID number	
4.	

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Write or Type Committee Na	пе	
Montenegro fo	r Congress	
_	Organization, Affiliated Committee, Joint Fundraising Representation	ve, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponso
Custodian of Records: lo books and records.	lentify by name, address (phone number optional) and position of the	e person in possession of committee
Satterfie Full Name	eld, David, , ,	
Mailing Address	228 S Washington Street	
Mailing Address	Suite 115	
	Alexandria	22314
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
3. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee, assistant treasurer).	ee; and the name and address of
Full Name Satterfie of Treasurer	ld, David, , ,	
Mailing Address	228 S Washington Street	
	Suite 115	
	Alexandria	22314
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	

TEC FOIL	m 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other safety deposit bo Name of Bank, I	r Depositories: List all banks or other depositories in which the committee deposits funds, loxes or maintains funds. Depository, etc. BB&T	holds accounts, rents
safety deposit bo	oxes or maintains funds. Depository, etc. BB&T ,300 S Washington Street	
safety deposit bo Name of Bank, [Depository, etc. BB&T 300 S Washington Street	
safety deposit bo Name of Bank, [Depository, etc. BB&T 300 S Washington Street Alexandria CITY STATE	14
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. BB&T 300 S Washington Street Alexandria CITY STATE Depository, etc.	14
safety deposit bo Name of Bank, [Mailing Address Name of Bank, [Depository, etc. BB&T 300 S Washington Street Alexandria CITY STATE Depository, etc.	14
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. BB&T 300 S Washington Street Alexandria CITY STATE Depository, etc.	14
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. BB&T 300 S Washington Street Alexandria CITY STATE Depository, etc.	14
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. BB&T 300 S Washington Street Alexandria CITY STATE Depository, etc.	14