Image# 202210109532113835			1	PAGE 1 / 8
FEC FORM 1	STATEMEI ORGANIZ			I
1. NAME OF	(Chask if name	Example: If tuning tune		ce Use Only
COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Friends of David	d Schweikert			
ADDRESS (number and street)	8175 East Evans Road			
(Check if address	# 13176			
is changed)	Scottsdale		AZ   8526	7
			AZ 8526 STATE ▲	
COMMITTEE'S E-MAIL ADDF				
(Check if address	info@campaignfinanci	al.com		
is changed)				
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)	om                         		
2. DATE 08 /	05 <sup>7</sup> <u>2022</u>			
3. FEC IDENTIFICATION	NUMBER ► C C	00540617		
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 o	complete.
Type or Print Name of Treasu	rer Martin, Steven, , ,			
Signature of Treasurer	rtin, Steven, , ,	[Electronically Filed]	Date 10	10 / Y Y Y Y 2022
NOTE: Submission of false, erro	oneous, or incomplete information ANY CHANGE IN INFORMA	may subject the person signing TION SHOULD BE REPORTED		enalties of 52 U.S.C. §30109
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		EC FORM 1 (Revised 06/2012)

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. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X This committee is a principal campaign committee. (Complete the candidate inform	nation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign com information below.)	nmittee. (Complete the candidate
Name of Schweikert, David, S., ,	<u> </u>
Candidate Office	State AZ
Party Affiliation REP Sought: K House Senate	President District 01
(c) This committee supports/opposes only one candidate, and is NOT an authorized c	
Name of Candidate	
Party Committee:       (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 V/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 committee. (i.e., nonconnected committee)	a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Lobbyist/Registrant PAC. This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)	
(g) This committee is an independent expenditure-only political committee (Super 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.

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 more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) 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
 2.

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## Friends of David Schweikert

6.	Name of Any Connected Or SCHWEIKERT VICT	-		nittee	, Jo	oint I	Func	drai	sing	Rep	ores	sent	ativ	e, o	r L	ead	lers	hip	PAC	; S	pon	sor	
	Mailing Address	PO Box 30844			1																		
		Bethesda										M				2082	24-0	844		- L			
			CITY	( 🔺							S	STAT	Έ					ZIP	со	DE			
	Relationship: Connected	Organization Affilia	ited Orç	ganiza	ation	,	<b>t</b> Jo	oint	Fund	raisii	ng I	Repi	ese	ntati	ve	[	I	_eac	lersh	ip F	PAC	Spo	onsor

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

CFS, Comp	pliance, , ,
Full Name	
Mailing Address	PO Box 30844
	Bethesda         MD         20824-0844         –
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Custodian of Records	Telephone number     301     -     654     -     3220

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	Martin, Steven, , ,
of Treasurer	
Mailing Address	PO Box 30844
	Bethesda         MD         20824
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image: Telephone number     301     -     654     -     3220

FEC Form 1 (Revised 02	)2/2	2009	9)																	F	Page	ə <b>4</b>		
Full Name of Designated Agent								 														1	1	
Mailing Address																						<u> </u>		
	L																							
	L																					L		
						CI	TΥ							5	STA	ΤE			ZI	ΡC	COD	E.		
Title or Position ▼																								
										Tele	əph	one	e n	umt	ber								<u> </u>	

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.

C	apital One Bank		
Mailing Address	4825 Cordell Avenue		
	Bethesda	MD 20814	
	CITY 🔺	STATE A	ZIP CODE ▲
Name of Bank, Depo	ository, etc. hase Bank		
Mailing Address	PO Box 659754		
	San Antonio	TX 78265	
		STATE 🔺	ZIP CODE

FFC	Form	<b>1</b> S	(Revised	02/2017)	۱
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**Optional Supplemental Information** for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:	
1.			FEC ID number
2.			FEC ID number C
3.			FEC ID number C
4.			FEC ID number C
	-	rganization, Affiliated Committee, Joint Fundrais /ictory Committee	sing Representative, or Leadership PAC Sponsor
1	Mailing Address	PO Box 30844	

	Bethesda	MD	20824-0844
Relationship:	CITY 🔺	STATE A	ZIP CODE
Connected	Organization	X Joint Fundraising Representative	Leadership PAC Sponsor

Designated Agent: Identify by name, address (phone number - optional) 8.

Full Name																										
Mailing Address	L			1																						
	L																									
	L																		L					- [		
TITLE OR POSITION	▼					C	ידו	Y A							S	TAT	Έ				ZIP	C	DC	E		
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Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds.

Name of Bank, Wells F Depository, etc.	argo Bank		
Mailing Address	8302 Woodmont Avenue		
		MD	
	CITY 🔺	STATE A	ZIP CODE 🔺

FFC	Form	1S	(Revised	02/2017)
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:
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1. [	FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4.	FEC ID number	С

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor TAKE BACK THE HOUSE 2022

Mailing Address	PO BOX 30844				
	BETHESDA			MD 2082	24-0844
Relationship:		CITY A		STATE 🔺	ZIP CODE
Connected	Organization	ed Committee	X Joint Fundraising	Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name				
Mailing Address				
TITLE OR POSITION	•	CITY A	STATE A	ZIP CODE
			Telephone Number	

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, Chain B Depository, etc.	Bridge Bank		
Mailing Address	1445-A Laughlin Avenue		
	McLean	VA	
	CITY 🔺	STATE A	ZIP CODE 🔺

F	FEC Form 1S (Revised 02/20	Optional Supplemental Info for Lines 5(g) or (h), 6, 8 a		Page _7_ of 8
5(g)	or(h). Joint Fundraising	Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
6.	-	Drganization, Affiliated Committee, Joint Fundra DR AZ-01 REPUBLICAN NOMINEE F		e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 9891		
				22219
	Deletionship			
	Relationship:	CITY   Organization Affiliated Committee Joint	STATE ▲	ZIP CODE  A ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION		L L L L L L L L L L L L L L L L L L L	

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.

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Name of Bank, Depository, etc.																						
Mailing Address																						
	L																					
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					С	ITY	<b>^</b>					S	TAT	Έ			ZIP	C	OD	E		1

. . . .

Telephone Number

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

5(g) or (h).	Joint	Fundraising	Participant:
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1	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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

Mailing Address	9458 TREELAKE RD			
	GRANITE BAY			95746
Relationship:	CITY 🔺		STATE A	ZIP CODE
Connected (	Organization X Affiliated Comr	mittee	Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																																
Mailing Address	l																															
	l																															
	Į																1												- [_			
TITLE OR POSITION	TITLE OR POSITION ▼ CITY ▲													S	ΓAT	E					ZIP	C	OD	E 🖌								
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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.																															
Mailing Address																															
	L																														
																												- [			
	CITY A												STATE A								ZIP CODE										