Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. People for English 1050 Lookout Dr ADDRESS (number and street) (Check if address is changed) Erie 16507 PΑ 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) (Check if address is changed) DATE 30 2015 C00283606 FEC IDENTIFICATION NUMBER > 3. X 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. **David Satterfield** Type or Print Name of Treasurer David Satterfield [Electronically Filed] 01 30 2015 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

| FEC Form 1 (Revised 02/2009) | Page 2 | | | |
|---|--|--|--|--|
| TYPE OF COMMITTEE Candidate Committee: | | | | |
| (a) X This committee is a principal campaign committee. (Comple | ete the candidate information below.) | | | |
| (b) This committee is an authorized committee, and is NOT a information below.) | principal campaign committee. (Complete the candidate | | | |
| Name of Candidate Philip S. English | | | | |
| Candidate Party Affiliation REP Office Sought: House | Senate President State PA District 03 | | | |
| (c) This committee supports/opposes only one candidate, and | is NOT an authorized committee. | | | |
| Name of Candidate | | | | |
| Party Committee: (National, State | (Democratic, | | | |
| (d) This committee is a or subordinate) con | | | | |
| Political Action Committee (PAC): | | | | |
| (e) This committee is a separate segregated fund. (Identify con | nected organization on line 6.) Its connected organization is a: | | | |
| Corporation | tion w/o Capital Stock Labor Organization | | | |
| Membership Organization Trade As | esociation 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 PA | 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 expen committees/organizations, at least one of which is an authorize | · | | | |
| (h) This committee collects contributions, pays fundraising expensions committees/organizations, none of which is an authorized committees. | | | | |
| Committees Participating in Joint Fundraiser | | | | |
| 1. | FEC ID number C | | | |
| 2. | FEC ID number C | | | |
| 3. | FEC ID number C | | | |
| | FEC ID number | | | |

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|--|---|-----------------------|
| Write or Type Committee Name | | . 9 |
| People for Engli | sh | |
| | ganization, Affiliated Committee, Joint Fundraising Representative, or Leaders | hip PAC Sponsor |
| NONE | | |
| | | |
| | | |
| Mailing Address | | |
| | | |
| | | |
| | CITY STATE | ZIP CODE |
| Relationship: Connected | Organization Affiliated Committee Joint Fundraising Representative Lea | adership PAC Sponsoi |
| Custodian of Records: Ident books and records. | ify by name, address (phone number optional) and position of the person in pos | session of committee |
| David Satte | rfield | |
| Full Name | ₂ 228 S Washington St | |
| Mailing Address | Suite 115 | |
| | Alexandria , VA , 22314 | |
| | | |
| Title or Position | CITY STATE | ZIP CODE |
| Treasurer | | 549 7705 |
| 3. Treasurer: List the name and any designated agent (e.g., as | address (phone number optional) of the treasurer of the committee; and the natissistant treasurer). | me and address of |
| Full Name David Satte | field | |
| of Treasurer | 228 S Washington St | |
| Mailing Address | | |
| | Suite 115 | |
| | Alexandria VA 22314 | 7ID CODE |
| Title or Position Treasurer | | ZIP CODE 549 - 7705 |

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|---|-----------------------|-------------------|---------------|--|--|
| | | | | | |
| Full Name of Designated Agent Philip S. En | | | | | |
| Mailing Address | 1050 Lookout Dr | | | | |
| | | | | | |
| | Erie CITY | PA 16507 STATE | ZIP CODE | | |
| Title or Position Assistant Treasurer | Telephone nu | mber | 857 – 6467 | | |
| 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. PNC Bank | | | | | |
| | 9th and State Streets | | | | |
| Mailing Address | | | | | |
| | | | | | |
| | Erie | PA 16501 | | | |
| | CITY | STATE | ZIP CODE | | |
| Name of Bank, Depository, e | etc. | | | | |
| | | | | | |
| Mailing Address | | | | | |
| | | | | | |
| | | | | | |
| | CITY | STATE | ZIP CODE | | |