8/3/2014

REULIVED SECRETARY OF THE SENATE PUBLIC RECORDS

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SECRETARY OF THE SENATE OFFICE OF PUBLIC RECORDS P. B. BOY 77578 WASHINGTON, DC 20013-7578

FAX 202-224-1851

14020652913

FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

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				Office Use Ohip -4 FIT 1	·
NAME OF COMMITTEE (in full)		Check if name s changed)	Example:If typing, type over the lines.	12FE4M5	-
Six in '14 Fund					
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ADDRECC (b and also at	228 S. V	/ashington Street			ı
ADDRESS (number and street) (Check if address	Suite 11				
is changed)		<u> </u>			İ
	Alexand	ria <u> l. l </u>		VA	
	С	ITY ▲		STATE ▲ ZIP CODE ▲	
COMMITTEE'S E-MAIL ADDI	RESS				
(Check if address	kdavis	@hdafec.com			ı
is changed)	04:1	0 5 44-11 44-			ı
	Optional	Second E-Mail Add	oress		1
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COMMITTEE'S WEB PAGE A	DDRESS (U	RL)			
(Check if address is changed)					
					İ
2. DATE 07	30 /	2014			
3. FEC IDENTIFICATION	NUMBER)	C			
4. IS THIS STATEMENT	NEW	(N) OR	AMENDED (A)		
I certify that I have examined	this Stateme	ent and to the best	of my knowledge and belief it i	s true, correct and complete.	-
•			, ,	•	
Type or Print Name of Treasu	rer <u>Keit</u>	h A. Davis			_
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Signature of Treasurer _	<u> Jeil</u>	T M. W.	drie	Date 07 30 2014	
NOTE: Submission of false agreement or incomplete information may subject the agree size this Statement to the agree that the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to the agree of Statement to					
THO IE. GUDINISSION OF IAISE, BIN	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 con	FCL FLIBIN I	-
Use Only			Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	(Revised 06/2012)	

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FEC Form 1 (Revi	ised 02/2009
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	FEC Fo	m 1 (Revised 02/2009)	Page 2
-	-	DMMITTEE	
Cai	ndidate	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. (Con information below.)	nplete the candidate
-	ne of didate		
	ididate iy Affiliati	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Pai	rty Con	mittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Pol	litical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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 s 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.)	
Joii	nt Fund	raising Representative:	
(g)	\sum	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1,	CAPITO FOR WEST VIRGINIA FEC ID number C CO	0539825
	2.	BILL CASSIDY FOR US SENATE FEC ID number C CO	0543983
	3.	COTTON FOR SENATE FEC ID number C CO	0499988
	4.	ED GILLESPIE FOR SENATE FEC ID number C COC	0555722

D۵	nе	3

FEC Form 1 (Revis	ed 02/2009)	rage 3
Write or Type Committee N	ame	
Six in '14 Fun	d	
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
NONE		
Mailing Address		
		ZIP CODE
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Double Joint Fundraising Representative	Leadership PAC Sponsor
 	_	
Custodian of Records:	Identify by name, address (phone number optional) and position of the person	in possession of committee
books and records.		
Keith a	A. Davis	ı
Full Name		
Mailing Address	228 S. Washington Street	
	Suite 115	<u> </u>
	Alexandria VA 22	314
	<u> </u>	
Title or Position	CITY STATE	ZIP CODE
_I Treasurer	703	549 7705
	Telephone number	, - <u> </u>
8. Treasurer: List the name	e and address (phone number optional) of the treasurer of the committee; and t	he name and address of
any designated agent (e.		no nome one are see a
Full Name Keith	A. Davis	
of Treasurer		
Mailing Address	228 S. Washington Street	
	Suite 115	
	Alexandria VA 22	314
	CITY STATE	ZIP CODE
Title or Position , Treasurer	, 703	549 7705 .
	Telephone number	- <u>- </u>

FEC Form 1 (Revi	ised 02/2009)		Page 4
· · · · · · · · · · · · · · · · · · ·			
Full Name of Designated Lisa R. Agent Lisa R.	Lisker		
Mailing Address	228 S. Washington Street		
	Suite 115		
	Alexandria CITY	STATE	22314 ZIP CODE
Title or Position Assistant Treasurer		Telephone number	03 - 549 - 7705
Banks or Other Deposit safety deposit boxes or n Name of Bank, Depositor		which the committee deposits (funds, holds accounts, rents
BB&	T		
Mailing Address	1909 K Street NW		
	Washington	DC	20006
	CITY	STATE	ZIP CODE
Name of Bank, Depositor	ry, etc.		
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Mailing Address			
	CITY	STATE	ZIP CODE

9.

FEC Form 1S (Revised	1 06/2011)		Page 5
Banks or Other Depositorie safety deposit boxes or maint Name of Bank, Depository, et	tains funds.		olds accounts, rents
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_	CITY 🗖	STATE	ZIP CODE 🚓
Name of Any Connected Or	rganization, Affiliated Committee, Joint Fundraising Re	presentative, or Leade	[ADDITIONAL] ership PAC Sponsor
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Relationship:	CITY	STATE 🏝	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraising Re	epresentative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name	<u> </u>		
Mailing Address			
Title or Position ₩	CITY &	STATE	ZIP CODE
	Telept	none number	
Joint Fundraiser Participan			[ADDITIONAL]
	ND FOR SENATE	EC ID number C	C00546770

FEC Form 1S (Revised	d 06/2011)		Page 6
Banks or Other Depositoric safety deposit boxes or main Name of Bank, Depository, e	itains funds.	·	accounts, rents
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Mailing Address			
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	CITY 🙇	STATE △	ZIP CODE 🛕
Name of Any Connected O	rganization, Affiliated Committee, Joint Fundra	aising Representative, or Leadersi	[ADDITIONAL] hip PAC Sponsor
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Mailing Address			لتتتبينا
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Relationship:	CITY ≜	STATE 🏝	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundr	aising Representative Leaders	ship PAC Sponsor
Designated Agent		[ADDITIONAL]
Full Name			111111
Title or Position	CITY &	STATE	ZIP CODE &
		Telephone number	
Joint Fundraiser Participar	nt	[4	ADDITIONAL]
6. MCFADDEN FO		FEC ID number C C00	0545921

FEC Form 18 (Revised	1 06/2011)		Page 7
Banks or Other Depositorie safety deposit boxes or main Name of Bank, Depository, e	tains funds.		olds accounts, rents
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Mailing Address			
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	CITY 🙇	STATE 🚣	ZIP CODE 🛕
Name of Any Connected Or	rganization, Affiliated Committee, Joint Fundraising Re	presentative, or Lead	[ADDITIONAL] ership PAC Sponsor
Mailing Address			
		ا ليا ل	
elationship:	CITY ≜	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraising Rep	presentative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position	CITY 🍎	STATE	ZIP CODE
	Telepho	one number	
Joint Fundraiser Participan			[ADDITIONAL]
I ROUNDS FOR S	FNATF .	C ID number	C00532465

FEC Form 1S (Revised 06	W2011)		Page 8
Banks or Other Depositories: safety deposit boxes or maintain Name of Bank, Depository, etc.	List all banks or other depositories in s funds.	which the committee deposits fund	s, holds accounts, rents
Mailing Address			ليبيبيي
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	CITY <u>a</u>	STATE 4	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Joint F	Fundraising Representative, or L	[ADDITIONAL] eadership PAC Sponsor
			لحديث
Mailing Address			
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Relationship:	CITY	STATE 🌢	ZIP CODE
Connected Organization	Affiliated Committee Joint	Fundraising Representative	Leadership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name		1111111111	111111111
Mailing Address			
			
Title or Position ♥	CITY #	STATE	ZIP CODE 🐇
		Telephone number	
Joint Fundraiser Participant			[ADDITIONAL]
8. ALLEN WEH FOR	SENATE	FEC ID number	C C00555573

FEC Form 18 (Revised	06/2011)		Page 9
Banks or Other Depositories safety deposit boxes or mainta Name of Bank, Depository, et	ains funds.		olds accounts, rents
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Mailing Address			
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	CITY 🙇	STATE △	ZIP CODE 🛕
Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraisin	g Representative, or Leade	[ADDITIONAL]
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Mailing Address			
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Relationship:	CITY	STATE 🏝	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraisin	g Representative Lead	ership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name Mailing Address			
maining / routious			
Title or Position	CITY 🛦	STATE	ZIP CODE
		elephone number	
Joint Fundraiser Participant			[ADDITIONAL]
9. DR MONICA WE	HBY FOR US SENATE	FEC ID number C	C00550996

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Page 1 of 1

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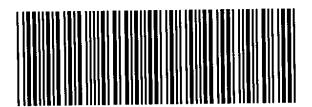
United States Senate

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