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. Todd Heussner for US Congress 1812 Champion Circle ADDRESS (number and street) (Check if address is changed) Evans 30809 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS llisker@hdafec.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00787143 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. Lisker, Lisa, , , Type or Print Name of Treasurer Lisker, Lisa,,, [Electronically Filed] 80 16 2021 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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		OMMITTEE	
Can		e Committee:	
(a)	X	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. (Corinformation below.)	nplete the candidate
Name Cand		Heussner, Todd, , ,	
Cand		Office	State
Party	Affiliati	on REP Sought: X House Senate President	District 10
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	Ш	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.)	
Join	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name	r age U
Todd Heussner for US Congress	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Le	eadership PAC Sponsor
NONE	
Mailing Address	
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person books and records.	in possession of committee
Lisker, Lisa, , ,	1
Full Name 228 S. Washington St.	
Mailing Address Ste. 115	
Alexandria VA 22	2314
	770.0005
Title or Position CITY STATE	ZIP CODE
Treasurer 703 Telephone number	_ 549 _ 7705
. Treasurer : List the name and address (phone number optional) of the treasurer of the committee; and any designated agent (e.g., assistant treasurer).	the name and address of
Full Name Lisker, Lisa, , ,	1
of Treasurer	
Mailing Address Ste. 115	
	2314
CITY STATE	ZIP CODE
Title or Position Treasurer 703 Telephone number	_ 549 7705

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE ZIF	P CODE
Title or Position		
	r Depositories: List all banks or other depositories in which the committee deposits funds, holds a oxes or maintains funds. Depository, etc.	
safety deposit b	Depository, etc. Truist/BB&T 1445 New York Ave., NW 4th Fl.	
safety deposit b Name of Bank,	Depository, etc. Truist/BB&T 1445 New York Ave., NW 4th FI.	
safety deposit b Name of Bank,	Depository, etc. Truist/BB&T 1445 New York Ave., NW 4th Fl. Washington DC 20005	IP CODE
safety deposit b Name of Bank,	Depository, etc. Truist/BB&T 1445 New York Ave., NW 4th Fl. Washington CITY STATE ZIF	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Truist/BB&T 1445 New York Ave., NW 4th FI. Washington CITY STATE ZIF Depository, etc. Security Federal Bank 7004 Evans Town Center Blvd.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Truist/BB&T 1445 New York Ave., NW 4th FI. Washington CITY STATE ZIF Depository, etc. Security Federal Bank 7004 Evans Town Center Blvd.	