FEC

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. Friends of David Schweikert 8175 East Evans Road ADDRESS (number and street) # 13176 (Check if address is changed) Scottsdale 85267 ΑZ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address info@campaignfinancial.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.davidschweikert.com (Check if address is changed) DATE 2024 C00540617 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Type or Print Name of Treasurer Martin, Steven, , Martin, Steven, . . Date 06 28 2024 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission

Use Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate 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. (Complete information below.)	the candidate
Name of Candidate Schweikert, David, S., ,	
Candidate Party Affiliation REP Office Sought: X House Senate President	State AZ District 01
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republication	atic, an, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	cted organization is a:
Corporation Corporation w/o Capital Stock Labor	Organization
Membership Organization Trade Association Coope	erative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregal committee. (i.e., nonconnected committee)	ited 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant 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.	
Joint Fundraising Representative:	
(i) 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.	or more political
(j) 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.	or more political
Committees Participating in Joint Fundraiser	
1 C	

ı	FEC Form 1 (Revised 0)	2/2009)			Page 3
٧	Vrite or Type Committee Name	Cabusileant			
6.	-	rganization, Affiliated Committee	e, Joint Fundraising Repre	esentative, or Lead	ership PAC Sponsor
	SCHWEIKERT VICTO	ORY COMMITTEE			
	Mailing Address	PO Box 30844			
				MD	
		Bethesda		MD 2082	24-0844
	_	CITY ▲	_	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	ation X Joint Fundraising	Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone numb	er optional) and position o	f the person in posse	ession of committee
	CFS, Comp	oliance, , ,			
	Mailing Address	PO Box 30844			
		Bethesda		MD 2082	24-0844
		CITY ▲		STATE A	ZIP CODE ▲
	Title or Position ▼				
	Custodian of Records		Telephone num	aber 301 -	654 - 3220
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optionssistant treasurer).	nal) of the treasurer of the	committee; and the	name and address of
	Full Name Martin, Stev	ven, , ,			
	Mailing Address	PO Box 30844			
		Bethesda		MD 2082	2 4
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone num	ber 301 -	654 3220

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
Title or Desition	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position •	Telephone nui	mber	
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committees or maintains funds.	ee deposits funds, hol	ds accounts, rents
Name of Bank, D	epository, etc.		
	Wells Fargo Bank		
Mailing Address	8302 Woodmont Avenue		
	BETHESDA	MD 20814	
	CITY A	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Forbright Bank		
Mailing Address	4445 Willard Ave		
	STE 1000		
	Chevy Chase	MD 20815	
	CITY ▲	STATE ▲	ZIP CODE ▲

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

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(h). Joint Fundrais	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
FREEDOMWORKS	VICTORY 2023		
Mailing Address	PO BOX 26141		
	1		
	ALEXANDRIA	VA	22313
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY	STATE Telephone Number	ZIP CODE A
Full Name	CITY	1	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ cries: List all banks or other depositories in white	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not boxes or not boxes. Class	CITY ▲ cries: List all banks or other depositories in white	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or not be boxes or not be boxes. Class Depository, etc.	CITY ▲ CITY ▲ ories: List all banks or other depositories in white the control of the control	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not boxes or not boxes. Class	CITY ▲ Ories: List all banks or other depositories in whinaintains funds.	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or not be boxes or not be boxes. Class Depository, etc.	ories: List all banks or other depositories in white naintains funds. © City Bank 2365 W Broad St	Telephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or not be boxes or not be boxes. Class Depository, etc.	CITY ▲ CITY ▲ ories: List all banks or other depositories in white the control of the control	Telephone Number	

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

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h). Joint Fundrais ii	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
EMMER MAJORITY	BUILDERS		
Mailing Address	824 S. MILLEDGE AVE. STE. 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
Connecte		t Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Join	t Fundraising Representa	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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320 131 31 3L				
WASHINGTON			DC 20003	3
	CITY A	STA	TE ▲	ZIP CODE ▲
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	CITY A	STAT	 F ▲	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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3.			FEC ID	number	C	
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			_			
Name of Any Conne	cted Organization, Affi	liated Committee, Joint	Fundraising Repr	esentative	e, or Leadership PAC Spo	ons
AMERICAN BAT	TLEGROUND FUND)		1 1 1		ı
Mailing Address	PO BOX 30844					
	BETHESDA		1	MD	20824	1
Polotionobin:		CITY ▲		STATE A	ZIP CODE ▲	
	entify by name, address		Joint Fundraising	Representa	ative Leadership PAC	Spo
Conr		Affiliated Committee X s (phone number – option		Representa	ative Leadership PAC	Spo
Conr				Representa	ative Leadership PAC	Spo
Conr Designated Agent: Id Full Name				Representa	Leadership PAC	Spo
Conr Designated Agent: Id Full Name				Representa	Leadership PAC	Spo
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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4.		FEC ID number	С
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GROW THE MAJOR			
Mailing Address	228 S Washington St		<u> </u>
, and the second	Ste 115		
	Alexandria	VA VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Join y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Schweikert-Lesko Vi	ctory Committee		
Mailing Address	PO Box 30844		
	Bethesda	MD	20824-0844
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Mailing Address	PO BOX 30844		
	BETHESDA	, , MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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4.		FEC ID number	С
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JULIANICAN	WINGWANT OND		
Mailing Address	P.O. BOX 2811		
ag / laa. 000			
	LAKELAND		33806
Relationship:	CITY ▲	STATE A	ZIP CODE A
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