| FEC<br>FORM 1                          | STATEMEN<br>ORGANIZA   | T OF 00<br>TION  | SECRETARY OF GHES       | ENAPE AAT 4:30                |
|--|--|--|-------------------------|-------------------------------|
| 1. NAME OF<br>COMMITTEE (in full)      | (Check if name<br>is changed)                                    | Example: If typing, type over the lines.   | 12FE4M5                 |                               |
| Democratic Senato                      | orial Campaign Commit  |  |                         |                               |
|  |  |  |                         |                               |
| ADDRESS (number and street)            | 120 Maryland Ave   | NE I I I I I I   |                         |                               |
| (Check if address<br>is changed)       | Washington   |  |                         | )2<br>[]                      |
|  | Cl   | ΓY   | STATE                   | ZIP CODE                      |
| COMMITTEE'S E-MAIL ADDF                |  |  |                         | 1                             |
|  |  |  |                         |                               |
| COMMITTEE'S WEB PAGE A<br>WWW.dscc.org | DDRESS (URL)   | <u>                                      </u>  | <u></u>                 | <u></u>                       |
|  |  |  |                         |                               |
|  | 20   |  |                         |                               |
| 2. DATE 09 '                           | 9 2008   |  |                         |                               |
| 3. FEC IDENTIFICATION                  |  | 2366   |                         |                               |
| 4. IS THIS STATEMENT                   | NEW (N) OR   | X AMENDED (A)  |                         |                               |
| I certify that I have examined         | this Statement and to the best of                                | my knowledge and belief it   | is true, correct and co | omplete.                      |
| Type or Print Name of Treasu           | rer John B. Poer   | sch, Jr/   |                         | ······                        |
| Signature of Treasurer                 | Sur  |  |                         | 09 2008                       |
| NOTE: Submission of false, erro        | neous, or incomplete information ma<br>ANY CHANGE IN INFORMATION |  |                         | nalties of 2 U.S.C. §437g,    |
| Office<br>Use<br>Only<br>FE3AN042.PDF  |  | For further information c<br>Federal Election Commissi<br>Toli Free 800-424-9530<br>Local 202-694-1100 | on <b>F</b> I           | EC FORM 1<br>Revised 12/2007) |

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| 5. | TYPE            | OF C               | OMMITTEE  |
|----|-----------------|--------------------|---|
|    | Cano            | didate             | Committee:  |
|    | (a)             |                    | This committee is a principal campaign committee. (Complete the candidate information below.)   |
|    | (p)             | $\square$          | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)   |
|    | Name<br>Candi   |                    |   |
|    | Candio<br>Party | date<br>Affiliatic | on Crice State State District District  |
|    | (c)             |                    | This committee supports/opposes only one candidate, and is NOT an authorized committee.   |
|    | Name<br>Candie  |                    |   |
|    | Party           | y Com              | nmittee:  |
|    | (d)             | <b>x</b>           | (National, State (Democratic,<br>This committee is a National or subordinate) committee of the Democratic Republican, etc.) Party.  |
|    | Polit           | ical A             | ction Committee (PAC):  |
|    | (e)             |                    | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:   |
|    | (-)             |                    |   |
|    |                 |                    | Corporation   |
|    |                 |                    | L Membership Organization L Cooperative   |
|    | (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 Leadership PAC. (Identify sponsor on line 6.)  |
|    | Joint           | Fund               | raising Representative:   |
|    | (g)             |                    | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political<br>committees/organizations, at least one of which is an authorized committee of a federal candidate. |
|    | (h)             | $\square$          | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political   |
|    |                 | الـــا             | committees/organizations, none of which is an authorized committee of a federal candidate.  |
|    |                 | Com                | mittees Participating in Joint Fundraiser   |
|    |                 | 1.                 |   |
|    |                 | 2.                 |   |
|    |                 | 3.                 |   |
|    |                 | 4.                 |   |
|    |                 | 5.                 |   |
|    |                 | ο.                 |   |
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|            |          |          |  |

| Full Name of<br>Designated<br>Agent | Darlene Setter      | · · · · · · · · · · · · · · · · · · · |
|-------------------------------------|---------------------|---------------------------------------|
| Mailing Address                     | 120 Maryland Ave NE |                                       |
|                                     | Washington          | DC 20002                              |
|                                     |                     |                                       |
| Title or Position                   |                     | Telephone number 202 - 224 - 2447     |

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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.

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|                 | Bank of America |      |       |                             |
|-----------------|-----------------|------|-------|-----------------------------|
|                 |                 |      |       |                             |
| Mailing Address | 730 15th        | St   |       |                             |
|                 |                 |      |       |                             |
|                 | Washingto       | n    | DC    | 20002                       |
|                 |                 | CITY | STATE | ZIP CODE                    |
| Name of Bank, [ | epository, etc. |      |       |                             |
|                 |                 |      |       | <u>, , , , , , , , , , </u> |
| Mailing Address |                 |      |       | <u>, , , , , , , , , , </u> |
|                 |                 |      |       |                             |
|                 |                 |      |       |                             |
|                 |                 | CITY | STATE | ZIP CODE                    |

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|--|---|--------------------|
| Write or Type Committee Name   |   |                    |
| Democratic Senate  | orial Campaign Committee  |                    |
| 6. Name of Any Connected O   | rganization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising R  | epresentative      |
| Senate 2008  |   |                    |
|  |   |                    |
| Mailing Address  | PO Box 1174   |                    |
| ·  | Springfield         VA         22151           CITY         STATE         ZIF   |                    |
| Relationship:  | Affiliated Committee Leadership PAC Sponsor X Joint Fundraising I   |                    |
| <ol> <li>Custodian of Records: Ident<br/>books and records.</li> </ol> | tify by name, address (phone number optional) and position of the person in posses  | ssion of committee |
| Full Name John B   | Poersch, Jr.         I <t< td=""><td></td></t<> |                    |
|  | Washington  |                    |
| Title or Position  | CITY STATE ZIP  | CODE               |
| Treasurer  | Telephone number $202 + - 224$  | -2447              |
| 8. Treasurer: List the name and any designated agent (e.g., as         | address (phone number optional) of the treasurer of the committee; and the name ssistant treasurer).  | and address of     |
| Full Name John B   | Poersch, Jr.  |                    |
| Mailing Address  | 120 Maryland Ave NE   |                    |
|  | Washington DC 200022<br>CITY STATE ZIP  |                    |
| Title or Position  | Telephone number 202 - 224  |                    |
| FE3AN042.PDF   |   |                    |

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| NANCY | ERICKSON |
|-------|----------|
| SEC   | RETARY   |

HART SENATE OFFICE BURDING SUITE 232 | WASHINGTON, DC 20510-7136 | PHONE: (202) 224-0322 |

## United States Senate

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