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FEC

FORM 1

STATEMENT OF
ORGANIZATION
(See instructions)

			Offic	e use only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1
Pima County Repul	blican Party Federal Campa	aign Committee		
ADDRESS (number and street)	5447 E Fifth St			
(Check if address	Suite 100			
is changed)	Tucson			85711
COMMITTEE'S E-MAIL ADD	DRESS	CITY	STATE	ZIP CODE 🔺
vic101w@gmail.com				
COMMITTEE'S WEB PAGE				
	ADDRESS (URL)			
COMMITTEE'S FAX NUMBE 5202192602				
2. DATE <b>0</b> 3	<b>D D</b> / <b>Y Y Y Y Y Y Y Y Y Y</b>			
3. FEC IDENTIFICATION	NUMBER	C C00387316		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined thi	is Statement and to the best of my kn	owledge and belief it is true, correct	and complete	
Type or Print Name of Treasu	urer Victor Williams			
Signature of Treasurer Ele	ectronically Filed by Victor Wi	lliams	Date <b>03</b>	<b>0 0 1 Y Y Y Y Y Y Y Y Y Y</b>
NOTE: Submission of false, erro	oneous, or incomplete information ma ANY CHANGE IN INFORMA	ay subject the person signing this St ATION SHOULD BE REPORTED		f 2 U.S.C. S437g.

Office Use Only				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2003)
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FEOForm 1 (Revised 02/2003)	Page <b>2</b>
5. TYPE OF COMMITTEE (Check One)	
<ul> <li>(a) This committee is a principal campaign committee. (Complete the candidate information below.)</li> <li>(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)</li> </ul>	
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate Pr	State State District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
(d) X This committee is a SUB (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
(e) This committee is a separate segregated fund	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate committee.	segregated fund or party
6. Name of Any Connected Organization or Affiliated Committee	
L	
Mailing Address	
CITY STATE	ZIP CODE 🛦
Relationship	
Type of Connected Organization:	
Corporation Corporation w/o Capital Stock La	bor Organization
	operative

	1 (Revised 02/2003)				Pa	ge <b>3</b>
/rite or Type Comr						
-		ty Federal Campaign Committe				
	cords: Identify to Committee books	by name, address, (phone numbe s and records.	r optional), and posit	ion of the	person in	
Full Name	Victor Willia	ms 				
Mailing Address		2749 W Placita Mesa Alt	a			
		Tucsn	AZ		85742 _	
Title or Position	•		STATE	•	ZIP COL	e 🛦
	Treasurer		Telephone number	520		9946
name and add	t the name and a ress of any desig	nated agent (e.g., assistant treas	, irer).			
name and add Full Name of Treasurer Mailing Address	Victor Willia	nated agent (e.g., assistant treas	ırer).			
name and add Full Name of Treasurer	ress of any desig	nated agent (e.g., assistant treas	ırer).		85742 _	
name and add Full Name of Treasurer	ress of any desig <u>Victor Willia</u>	nated agent (e.g., assistant treas ms 2749 W Placita Mesa Alt	a	 	<u>85742</u> – ZIP COI	 DE ▲
name and add Full Name of Treasurer Mailing Address	ress of any desig <u>Victor Willia</u>	nated agent (e.g., assistant treas ms 2749 W Placita Mesa Alt Tucsn	aAZ_	 520 _		DE ▲ 
name and add Full Name of Treasurer Mailing Address	victor Willian	nated agent (e.g., assistant treas ms 2749 W Placita Mesa Alt Tucsn	a AZ		ZIP COI	
name and add         Full Name         of Treasurer         Mailing Address         Title or Position	victor Willian	nated agent (e.g., assistant treas ms 2749 W Placita Mesa Alt Tucsn	a AZ		ZIP COI	
name and add Full Name of Treasurer Mailing Address Title or Position Full Name of Designated Agent	victor Willian	nated agent (e.g., assistant treas ms 2749 W Placita Mesa Alt Tucsn	a AZ		ZIP COI	
name and add Full Name of Treasurer Mailing Address Title or Position Full Name of Designated Agent	Victor Willian Treasurer	nated agent (e.g., assistant treas ms 2749 W Placita Mesa Alt Tucsn	a AZ	<u>520</u>	ZIP COI	9946

	FEC Form	1 (	Rev	vise	ed (	02/2	200	03)																											F	'ag	e 4			
9.	Banks or Other safety deposit bo Name of Bank, D	or	mai	inta	ains		List inds	ba	nks	6 01	r otł	ner	de	pos	ito	ries	s in	wh	iich	the	e co	omn	nitte	e d	epo	sit	s fu	nds	s, h	old	s a	000	unt	s, r	ent	S				
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