2009 OCT 26 AM 7: 39

FEC FORM 1	STATEMEI		٠٧٠ الار	Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
COMBAT V	ETERANS FOR	CO.NGRESS. P	46	
4000000	1925 C.F.N.	TILLY PARKE	AST. SW	HTE, 2120
ADDRESS (number and st (Check if address is changed)	1	UES	J	10067
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL A (Check if addr is changed)	DDRESS (Please provide only one e	mail address)	net	<u> </u>
COMMITTEE'S WEB PAG (Check if addre is changed)	NONE			
2. DATE	•			
3. FEC IDENTIFICATION	ON NUMBER C			
ر برخ 4. IS THIS STATEMEN	NEW (N) (N)OR	AMENDED (A)		ř.
I certify that I have examing type or Print Name of Tree	ined this Statement and to the best masurer MICHAEL CU		is true, correct as	nd complete.
Signature of Treasurer	Michael (Cury	Date OCTOB	ER 19, 2009
NOTE: Submission of false,	erroneous, or incomplete information in ANY CHANGE IN INFORMATIO	may subject the person signing to ON SHOULD BE REPORTED WI		e penalties of 2 U.S.C. §437g.
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115	E OF C)V(V(V)				
Car	ndidate	Committee:				
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(p)		This committee is an authorized committee, and is NOT a principal campaign committee. (Coinformation below.)	mplete the candidate			
Nam Can	ne of didate					
	didate y Affiliatio	Office n Sought: House Senate President	State District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Cand	e of didate		<u> </u>			
Pari	ty Com	mittee:				
(d)		(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Poli	tical Ac	tion Committee (PAC):				
(e)		This committee is a separate segregated fund. (identify connected organization on line 6.) its co	nnected organization is a:			
		Corporation w/o Capital Stock Non-Conference Trade Association	Labor Organization Cooperative			
A		In addition, this committee is a Lobbyist/Registrant PAC.				
6		This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (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 Fundr	alsing 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political			
	Comm	nittees Participating in Joint Fundraiser				
	1.	FEC ID number C				
	2.	FEC ID number C				
	3.	FEC ID number C				

4. FEC ID number C

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CITY

STATE

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VETERANS FOR CONGRESS PAC

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Write or Type Committee Name

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Title or Position

TREASURER

CITY

Page 4

ZIP CODE

STATE

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Full Name of

Mailing Address

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Received from Senate Public Records Office	Date of Receipt				
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Other (Specify):	ceipt or Postmarked				
En	10/26/09				
(3/2005)	DATE PREPARED				