FEC FORM 1

STATEMENT OF ORGANIZATION

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_Office Vse Poly OF LITTE

				EC MAIL CENTER	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	CO TIME OF THE	
CPE VICTORY FU	JND (CALIFORNI)	ANS FOR A PRO	SPEROUS	ECONOMY VF)	
<u> </u>	PO BOX 13882			<u></u>	
ADDRESS (number and street)	<u> </u>	<u> </u>	<u></u>	<u> </u>	
(Check if address is changed)	BAKERSFIELD		CA	<u> </u>	
	(CITY	STATE	ZIP CODE	
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) info@campaignfinancial.com					
(Check if address is changed)			<u></u>		
COMMITTEE'S WEB PAGE AD	DRESS (URL)				
(Check if address is changed)			<u> </u>		
2. DATE 10 1	5 2012 UMBER C C	00515569			
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)	······		
I certify that I have examined to	his Statement and to the best	of my knowledge and belief	it is true, correct a	and complete.	
Type or Print Name of Treasure	ar Jill Thom son			<u></u>	
Signature of Treasurer Jill Th	om son	0/4	Date 10	15 2012	
NOTE: Submission of false, erron	eous, or incomplete information ANY CHANGE IN INFORMATION			he penalties of 2 U.S.C. §437g.	
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)	

		DMMITTEE Committee:				
(a)	Souria	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 the candidate information below.)				
	me of Indidate					
	ndidate rty Affiliatio	Office State CA Sought: House Senate President District				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	me of Indidate					
Pa	arty Com					
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.				
Political Action Committee (PAC):						
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is					
		Corporation Corporation w/o Capital Stock Labor Organization				
		Membership Organization Trade Association Cooperative				
		In addition, this committee is a Lobbyist/Registrapt PAC.				
(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 Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Jo	int Fund	raising Representative:				
(g)	X	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
	Com	mittees Participating in Joint Fundraiser				
	1.	VALADAO FOR CONGRESS FEC ID number C C00499392				
	2.	STRICKLAND FOR CONGRESS 2012 FEC ID number C C00510545				
	3.	DOUG LAMALFA COMMITTEE FEC ID number C C00509422				
	4.					

Write or Type Committee Name								
CPE VICTORY FUND (CALIFORNIANS FOR A PROSPEROUS ECONOMY VF)								
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor								
NONE								
Mailing Address								
	CITY STATE ZIP CODE							
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor							
. Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and position of the person in possession of committee							
Campaign	Financial Services							
Mailing Address	PO Box 30844							
	Bethesda MD 20824-0844							
Title or Position	CITY STATE ZIP CODE							
	Telephone number							
3. Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the name and address of ssistant treasurer).							
Full Name Jill Thomso of Treasurer	n 							
Mailing Address	PO Box 30844							
	Bethesda MD 20824 - LINE CONTROL OF THE CONTROL OF							
Title or Position	CITY STATE ZIP CODE							
<u> </u>	Telephone number							

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Full Name of Designated Agent		<u> </u>
Mailing Address		1 1 1 1 1 1 1 1 1
maming records		
		1 1_1
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	<u> </u>
Name of Bank, I	Citizens Business Bank 3911 Coffee Road Bakersfield CA	93308
	CITY STATE	ZIP CODE
Name of Bank,	Depository, etc.	
	<u> </u>	
Mailing Address		
	<u> </u>	
		<u> </u>
	CITY STATE	ZIP CODE

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Jun	10/31/1				
(3/2005)	DATE PREPARED				