FEC FORM 1

# STATEMENT OF ORGANIZATION

RECEIVED

2012 MAY 23 AM 8: 51 EECMAIL CENTER

NAME OF     COMMITTEE (in full)	(Check if no is changed)	•	e:If typing, type e lines.	12FE4M5	A P Care
Target State Vict	ory Fund		1 1 1 1 1		1 1 1 1 1 1 1
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ADDRESS (number and street)	1609 Shoal Creek E	Blvd, Ste. 203			
(Check if address is changed)	Austin			TX 7	B71!
		CITY		STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	SS (Please provide on a mandagravitt@m:		ss)		1
(Check if address is changed)		<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
COMMITTEE'S WEB PAGE ADD		entrement et al. 1960 et al. 1960 et 1960 et 1967 et 1960 et al. 1960 et 19	e en	andrea (1995) and	en i na maria de la companie de la c La companie de la co
(Check if address is changed)		· · · · · · · · · · · · · · · · · · ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2. DATE 04 30	2012				
3. FEC IDENTIFICATION NU		C			
4. IS THIS STATEMENT X	NEW (N)	OR S	AMENDED (A)		
I certify that I have examined th	is Statement and to	the best of my kno	wledge and belief it	is true, correct a	nd complete.
Type or Print Name of Treasurer	Amanda M. Gravitt				
Signature of Treasurer	(Amo	mola W	Khavit	pate 0.5	03 2012
NOTE: Submission of false, errone					ne penalties of 2 U.S.C. §437g.
Office Use		Fe	r further information c deral Election Commissi I Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

		OMMITTEE  Committee:
(a)	:	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.)
Name Candi		
Candi Party	idate Affiliati	Office State on Sought: House Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Candi		
Part	y Con	nmittee:
(d)	-	This committee is a (National, State 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 Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant 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 ts a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint	Fund	Iraising Representative:
(g)	· .	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)	X	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 Fundralser
	1.	HAWAII REPUBLICAN PARTY FEC ID number C C00085506
	2.	MAINE REPUBLICAN PARTY FEC ID number C C C00003111
	3.	MASSACHUSETTS REPUBLICAN STATE CONGRESSIONAL  COMMITTEE
	4.	MISSOURI REPUBLICAN STATE COMMITTEE-FEDERAL

120 (0) (	(crisic delector)				
Write or Type Committ	ee Name				
Target Stat	Target State Victory Fund				
6. Name of Any Con	nected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
NONE					
	<u> </u>				
Mailing Address					
, and the second					
	CITY STATE ZIP CODE				
Relationship: C	Connected Organization Affiliated Committee Joint Fundralsing Representative Leadership PAC Sponsor				
<ol> <li>Custodian of Reco books and records.</li> </ol>	rds: Identify by name, address (phone number optional) and position of the person in possession of committee				
, A	manda M. Gravitt				
Full Name	,323 Rawhide Loop				
Mailing Address					
	Round Rock TX 78681				
Title or Position	CITY STATE ZIP CODE				
Treasurer	Telephone number 512 - 494 - 8535				
	name and address (phone number optional) of the treasurer of the committee; and the name and address of nt (e.g., assistant treasurer).				
,	manda M. Gravitt				
of Treasurer	[323 Rawhide Loop				
Mailing Address					
	Round Rock TX 78681				
Title or Position	CITY STATE ZIP CODE  Telephone number 512 - 494 - 8535				
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! _	FEC Form 1 (Re	evised 02/2009)		Page <b>4</b>
	Full Name of Designated Agent			
	Mailing Address		1 [ [ ] ] ] [	
		CITY	STATE	ZIP CODE
	Title or Position	<u>!                                      </u>	ephone number	<b>I-</b>
	Banks or Other Depos safety deposit boxes or	sitories: List all banks or other depositories in which maintains funds.	the committee deposits fund	s, holds accounts, rents
	Name of Bank, Deposite	ory, etc.		
	BB8	<u>\$</u> T	<u> </u>	
	Mailing Address	1909 K St NW		
		Washington	LL DC 2	0006
		··· CITY	STATE	ZIP CODE
	Name of Bank, Deposite	ory, etc.	-	
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	Mailing Address			
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		CITY	STATE	ZIP CODE

FEC Form 1S (Revis	ed 06/2011)		Page 5
Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository,	intains funds.	•	olds accounts, rents
Mailing Address			
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	CITY 🗖	STATE <b>△</b>	ZIP CODE 🛕
Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising	g Representative, or Leade	[ ADDITIONAL ership PAC Sponsor
Mailing Address			
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destantant	CITY	STATE 4	ZIP CODE
elationship: Connected Organization	Affiliated Committee Joint Fundraising	g Representative Lead	dership PAC Sponsor
Designated Agent			[ ADDITIONAL ]
Full Name			
Mailing Address			<del></del>
Title or Position	CITY 🌢	STATE	ZIP CODE
		lephone number	
Joint Fundraiser Particip	ant		[ ADDITIONAL ]
, MONTANA REPU	BLICAN STATE CENTRAL COMMITTEE	FEC ID number C	C00008086
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FEC Form 1S (Revise	d 06/2011)		Page 6
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Designated Agent			[ADDITIONAL]
Full Name	<del></del>		
Mailing Address			
	<u></u>		
Title or Position	CITY #	STATE	ZIP CODE
		Telephone number	
Joint Fundraiser Participa . NATIONAL REPL	nt JBLICAN SENATORIAL COMMITTI	FF.	[ ADDITIONAL ]
6. LILLIAN BEFORE	11111111111111111111111111111111111111	FEC ID number C	C00027466

FEC Form 1S (Revis	sed 06/2011)		Page 7
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Mailing Address			
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Connected Organization	Affiliated Committee Joint Fund	draising Representative Le	adership PAC Sponsor
Designated Agent			[ ADDITIONAL ]
Full Name	· ·		
Mailing Address			
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Title or Position ♥	CITY &	STATE	ZIP CODE
		Telephone number	
Joint Fundraiser Particip	pant		[ ADDITIONAL ]
-	EPUBLICAN PARTY	FEC ID number C	C00032334

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Banks or Other Depositori safety deposit boxes or mair		he committee deposits funds, ho	ds accounts, rents
Name of Bank, Depository,		[	ADDITIONAL]
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ationahin.	city <b>≜</b>	STATE .	ZIP CODE
ationship:	Affiliated Committee Joint Fundra	ising Representative Lead	ership PAC Sponsor
Connected Organization	<del></del>		CADDITIONAL 1
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Designated Agent			[ ADDITIONAL ]
Designated Agent Full Name			[ ADDITIONAL ]
Designated Agent			[ ADDITIONAL ]
Designated Agent Full Name			[ ADDITIONAL ]
Designated Agent Full Name	CITY &	STATE	ZIP CODE
Designated Agent  Full Name   Mailing Address	CITY &		
Designated Agent Full Name  Mailing Address	CITY &	STATE Telephone number	

CITY STATE ZIP CODE A  [ADDITIONAl Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor  Mailing Address  CITY STATE ZIP CODE A  Telephone number  Telephone number  Telephone number  IADDITIONAL 1	FEC Form 1S (Revise	ed 06/2011)		Page 9
ADDITIONAL	safety deposit boxes or mai	intains funds.	the committee deposits funds,	
CITY STATE ZIP CODE A  [ADDITIONAl Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor  Mailing Address  CITY STATE ZIP CODE A  Leadership PAC Sponsor  Connected Organization  Designated Agent Full Name  Mailing Address  Title or Position CITY STATE ZIP CODE A  Telephone number  Telephone number				
ADDITIONAl   Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor   Mailing Address	Mailing Address			
ADDITIONAl   Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor   Mailing Address				
ADDITIONAl Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor    Mailing Address		<u> </u>	ا ليا ليب	ىــا-لىـــا
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor  Mailing Address  CITY  STATE  ZIP CODE  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor  Designated Agent  Full Name  Mailing Address  Title or Position  CITY  STATE  ZIP CODE  Telephone number  Telephone number		CITY 🙇	STATE <b>△</b>	ZIP CODE 🛕
Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor  [ADDITIONAL]  Title or Position  Telephone number  Tabulationship:  CITY  STATE  ZIP CODE  Telephone number  Tabulationship:  CITY  STATE  ZIP CODE	Name of Any Connected (	Organization, Affiliated Committee, Joint Fundra	sising Representative, or Lea	[ ADDITIONAl dership PAC Sponsor
Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor  [ADDITIONAL]  Title or Position  Telephone number  Telephone number				
Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor  [ADDITIONAL]  Title or Position  Telephone number  Tabulationship:  CITY  STATE  ZIP CODE  Telephone number  Tabulationship:  CITY  STATE  ZIP CODE				
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Connected Organization			<del></del>	
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Full Name  Mailing Address  Title or Position   CITY   STATE   ZIP CODE   Telephone number			_	_
Title or Position   CITY   STATE   ZIP CODE   Telephone number   TARRITIONAL I	Connected Organization		_	adership PAC Sponsor
Telephone number	Connected Organization  Designated Agent		_	adership PAC Sponsor
Telephone number	Connected Organization  Designated Agent  Full Name	Affiliated Committee Joint Fundra	_	adership PAC Sponsor
LADDITIONAL 1	Connected Organization  Designated Agent  Full Name	Affiliated Committee Joint Fundra	_	adership PAC Sponsor
Joint Fundraiser Participant [ADDITIONAL]	Designated Agent Full Name  Mailing Address	Affiliated Committee Joint Fundra	aising Representative Le	adership PAC Sponsor
	Designated Agent Full Name  Mailing Address	Affiliated Committee Joint Fundra	aising Representative Le	adership PAC Sponsor

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.	
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Mailing Address	لببي
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CITY ▲ STATE ▲ ZIP COD	E 🛕
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Joint Fundraiser Participant [ADDITIO	NAL]
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE  10.   1   1   1   1   1   1   1   1   1	

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.    ADDITIONAL	كتمان فسيدر والمراجع والمراجع والمراجع	ed 06/2011)		Page 11
Mailing Address  CITY	Banks or Other Depositor	es: List all banks or other depositories in which the committ	ee deposits funds	, holds accounts, rents
Mailing Address  CITY A STATE ZIP CODE A  [ADDITIONAL Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor  Mailing Address  CITY STATE ZIP CODE A  Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor  Designated Agent [ADDITIONAL]  Full Name Mailing Address  Title or Position CITY STATE ZIP CODE A  Telephone number	• •			I ADDITIONAL I
CITY A STATE A ZIP CODE A  Rame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor  Mailing Address  CITY STATE ZIP CODE A  STATE ZIP CODE A  Leadership PAC Sponsor  Connected Organization  Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor  Designated Agent  Full Name  Mailing Address  Title or Position CITY STATE ZIP CODE A  Telephone number  Telephone number  [ADDITIONAL]	Name of Bank, Depository,	etc.		[ ADDITIONAL ]
CITY A STATE A ZIP CODE A  Rame of Any Connected Organization, Affillated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor  Mailing Address  CITY STATE ZIP CODE A  STATE ZIP CODE A  Leadership PAC Sponsor  Designated Agent Full Name Mailing Address  Title or Position CITY STATE ZIP CODE A  Telephone number  Telephone number  [ADDITIONAL]	للللا			
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Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor  Mailing Address  CITY  STATE  ZIP CODE  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor  Designated Agent  Full Name  Mailing Address  Title or Position  CITY  STATE  ZIP CODE  Telephone number  Telephone number  [ADDITIONAL]		CITY 🙇	STATE 4	ZIP CODE 🛕
CITY STATE ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor  Designated Agent [ADDITIONAL]  Full Name Mailing Address  Title or Position CITY STATE ZIP CODE STATE ZIP CODE STATE ADDITIONAL]	Name of Any Connected C	organization, Affiliated Committee, Joint Fundraising Repre	esentative, or Lea	
CITY STATE ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor  Designated Agent [ADDITIONAL]  Full Name Mailing Address  Title or Position CITY STATE ZIP CODE				
CITY STATE ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor  Designated Agent [ADDITIONAL]  Full Name Mailing Address  Title or Position CITY STATE ZIP CODE				
Designated Agent  Full Name  Mailing Address  Title or Position   CITY   Telephone number  Telephone number  Telephone number  [ADDITIONAL]	Mailing Address			
Title or Position    Affiliated Committee    Joint Fundraising Representative    Leadership PAC Sponsor  [ADDITIONAL]  Affiliated Committee    Joint Fundraising Representative    Leadership PAC Sponsor  [ADDITIONAL]  Title or Position    Telephone number    Telephone number    [ADDITIONAL]				
Designated Agent  Full Name  Mailing Address  Title or Position   CITY   Telephone number  Telephone number  Telephone number  [ADDITIONAL]		لىبىلىلىلىلىلىلىلىلىلىلىلىلىلىلىلىلىلىل		ىنىا-لىنىنا
Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor    Connected Organization	slationshin:	сіту≜	STATE 🏝	ZIP CODE 🐴
Full Name  Mailing Address  Title or Position   CITY   STATE   ZIP CODE   Telephone number   [ADDITIONAL]		Affiliated Committee Joint Fundraising Repre	esentative L	eadership PAC Sponsor
Full Name  Mailing Address  Title or Position   CITY   STATE   ZIP CODE   Telephone number    [ADDITIONAL]	Designated Agent		· · · · · · · · · ·	[ ADDITIONAL ]
Title or Position    CITY    STATE    ZIP CODE    Telephone number    [ADDITIONAL]	1 .	<u> </u>		
Title or Position    CITY    STATE    ZIP CODE    Telephone number    [ADDITIONAL]	Full Name			
Joint Fundraiser Participant [ADDITIONAL]				
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Joint Fundraiser Participant [ADDITIONAL]	Mailing Address		STATE	ZIP CODE &
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Con	firmation™ Label
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Overnight Delivery Service (Specify):	Shipping Date
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Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
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