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2011 JUN -6 AM 9: 3L

FEC STATEMENT OF ORGANIZATION

			(See instructions)				Office use only
1,	NAME OF COMMITTEE (in	full)	(Check if name is changed)		mple: If typying, type the lines	12FE4	VI5
L	Womack Major	rity Fund		111		1111	
L		للللب					
ADI	ORESS (number and s	street)	228 S. Washington	St., Ste.	115 		
	(Check if address is changed)	L.	Alexandria			<u> </u>	1
						سب	
				CITY_		STATE	ZIP CODE 📥
CO			Please provide only one lisker@hdafec.com		ldress)		1
	(Check if address is changed)	نــا	skej@ildaico.com	<u>.</u>			
		با					
CO	COMMITTEE'S WEB PAGE ADDRESS (URL)						
П	(Check if address	L			1 1 1 1 1 1 1 .		
<u></u>	is changed)	1.		1 1 1	1 1 1 1 1 1 1		
2.	DATE 0.6	′ D D	20,11,				
3.	FEC IDENTIFICA	TION NUMBER	₹	С			
4.	4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)						
Lcer	I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete						
Type or Print Name of Treasurer Lisa Lisker							
Signature of Treasurer Electronically Filed by: Lisa Lisker Date							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS							
	Office				For further information		
	Use				Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

5.	TYPE OF COMMITTEE (Check One)							
	Candidate 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 of Candidate							
	Candidate Party Affili							
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate							
	Party Con	nmittee:						
	(d)	(National, State (Democratic, This committee is a (or subordinate) committee of the 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 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						
	L	committee. (i.e., nanconnected committee)						
In addition, this committee is a Lobbyist/Registrant PAC.								
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
	Joint Fundraising 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)	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.						
	Co	mmittees Participating in Joint Fundraiser						
		1. WOMACK FOR CONGRESS COMMITTEE 1. FEC ID number C C00477745						
		RAZOR PAC 2. FEC ID number C C00493361						
		3. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C C00075820						
		FEC ID number						

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Write or Type Committee !	ame						
Womack Majority F	und						
6. Name of Any Connec	ed Organization, Affiliated Committee, Joint Fundraising Rep	resentative, or Lea	dership PAC Sponsor				
NONE		<u> </u>	<u> </u>				
		<u> </u>					
Mailing Address							
		ا لیا					
	CITYA	STATE	ZIP CODE				
Relationship:							
Connected Organi	zation Affiliated Committee Joint Fundraising F	Representative	Leadership PAC Sponsor				
Mailing Address							
	Alexaddria		22314 _				
Title or Position ♥	CITY A	STATEA	ZIP CODE A				
Treas	urer Telephone	number <u>703</u>	- <u>549</u> - <u>7705</u>				
	ame and address (phone number optional) of the treasur	rer of the committe	ee; and the				
name and address o	name and address of any designated agent (e.g., assistant treasurer).						
Full Name of TreasurerL	sa Lisker						
Mailing Address	228 S. Washington St., Ste. 115						
	Alexandria		22314 _				
Title or Position ♥	CITY A	STATEA	ZIP CODE 4				
Treas	eurer Telephone	703	_ 549 _ 7705				

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Full Name of Designated Agent	Keith Davis					
Mailing Address	228 S. Washington St., Ste. 115					
	Alexandria		22314 -			
Title or Position ♥	CITY A	STATE A	ZIP CODE A			
Assist	ant Treasurer	Telephone number 703	549 7705			
. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, ren safety deposit boxes or maintains funds. Name of Bank, Depository, etc.						
Mailing Address	1909 K St., NW					
	Washington	pc	20006 _			
	CITY 🗖	STATE △	ZIP CODE A			
Name of Bank, Deposit	ory, etc.					
Mailing Address						
						
	CITY 🗖	STATE △	ZIP CODE A			

(3/2005)

Federal Election C ENVELOPE REPLACEMENT PAGE F The FEC added this page to the end of this t	OR INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or S	Signature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date 6/3/1) Next Business Day Delivery
Received from House Records & Registrat	Date of Receipt tion Office
Received from Senate Public Records Offi	Date of Receipt ce
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Es .	6/6/11
PREPARER	DATE PREPARED