FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Nancy Pelosi Victory Fund 430 S Capitol St SE ADDRESS (number and street) 2nd Floor (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS compliance@dccc.org (Check if address is changed) Optional Second E-Mail Address forte@dccc.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2017 C00492421 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Sena, Daniel, , , Type or Print Name of Treasurer Sena, Daniel,,, [Electronically Filed] 02 2017 Signature of Treasurer 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 contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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		OMMITTEE	
Can	ididate	Committee:	
(a)	Ш	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. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate / Affiliation	Office Sought: House Senate President	State DC District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	e of didate		
Par	ty Com	nmittee:	
(d)			Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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 se committee. (i.e., nonconnected committee)	gregated 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 Fund	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	Nancy Pelosi for Congress FEC ID number C C002	213512
	2.	PAC to the Future	344234
	3.	DCCC FEC ID number C C000	000935
	4.		

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Write or Type Committee N		- 0
Nancy Pelosi	Victory Fund	
	ed Organization, Affiliated Committee, Joint Fundraising Represent	tative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY	TE ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of	the person in possession of committee
Sena,	Daniel, , ,	
Mailing Address	430 South Capitol Street, SE	
J	2nd Floor	
	Washington	20003
Title or Position	CITY STAT	E ZIP CODE
Treasurer	Telephone number	202 863 - 1500
Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of the comr.g., assistant treasurer).	nittee; and the name and address of
Full Name Sena, of Treasurer	Daniel, , ,	
Mailing Address	430 South Capitol Street, SE	
	2nd Floor	
	Washington	20003
Title or Position , Treasurer	CITY STAT	E ZIP CODE
1	Telephone number	

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Full Name of Designated Agent	Forte-Mackay, Jacqueline, , ,	
Mailing Address	430 South Capitol Street, SE	
	2nd Floor	
	Washington DC 20003 CITY STATE ZI	P CODE
Title or Position Assistant Treasu	urer	3501
		accounts, rents
safety deposit bo	Depository, etc. Bank of America, N.A. 730 15th Street, NW	accounts, rents
safety deposit bo Name of Bank, [Depository, etc. Bank of America, N.A.	accounts, rents
safety deposit bo Name of Bank, [Depository, etc. Bank of America, N.A. 730 15th Street, NW Washington DC 20005	accounts, rents
safety deposit bo Name of Bank, [Depository, etc. Bank of America, N.A. 730 15th Street, NW Washington CITY STATE ZI	
safety deposit bo Name of Bank, [Mailing Address	Depository, etc. Bank of America, N.A. 730 15th Street, NW Washington CITY STATE ZI	
safety deposit bo Name of Bank, [Mailing Address	Depository, etc. Bank of America, N.A. 730 15th Street, NW Washington CITY STATE ZI Depository, etc.	
Name of Bank, I	Depository, etc. Bank of America, N.A. 730 15th Street, NW Washington CITY STATE ZI Depository, etc.	
Name of Bank, I	Depository, etc. Bank of America, N.A. 730 15th Street, NW Washington CITY STATE ZI Depository, etc.	