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FEC FORM

STATEMENT OF ORGANIZATION

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FORM 1	ORGANIZATION	2014 APR 22 PM 12: 18	
		OFFICE OF	
NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) ever the lines.	12FE4M5	
Inhofe Victory Co	ommittee 2014		
<u> </u>			
ADDRESS (number and street)	901 N Washington St, Suite 700		
(Check if address			
is changed)	Alexandria	VA 22314 STATE ▲ ZIP CODE ▲	
COMMITTEE'S E-MAIL ADDRI	ESS		
(Check if address is changed)	tim@kochandhoos.com	· 	
	Optional Second E-Mail Address	1	
•			
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DDRESS (URL) .		
# * ` _	21 2014		
3. FEC IDENTIFICATION N	IUMBER ▶		
4. 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.	
Type or Print Name of Treasur	er Thoothy A. Koch		
(Othy A. April Toll	Date 04 21 2014	
NOTE: Submission of false, error	neous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED		
Office Use Only	For further information Federal Election Commis Toll Free 800-424-9530	contact: FFC FORM 1	

5.

		OMMITTEE				
Cen	didate	e Committae:				
(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 Cand	e of lidate					
	id ate Affiliati	Office State				
(c)	Carre	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand	e of lidate					
Par	ty Con	nmittee:				
(d)	3	This committee is a (National, State (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 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)	South and the second	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 Lebbyist/Rogistrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Join	t Fund	draising 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.	FRIENDS OF JIM INHOFE FEC ID number C C00207993				
	2.	FUND FOR A CONSERVATIVE FUTURE FEC ID number C C00326082				
	3.	FEC ID number				

Write or		
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Write or Type Committee N	lame	
Inhofe Victory	Committee 2014	
<u>_</u>	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
NONE		1 [
		1 1 1 1 1
Mailing Address		
	CITY STATE ZIF	P CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative Leade	rship PAC Sponsor
·		<u> </u>
	Identify by name, address (phone number optional) and position of the person in posses	ssion of committee
books and records.		
Timoti Full Name	hy A. Koch	<u> </u>
Mailing Address	901 N Washington St, Suite 700	<u> </u>
- .		<u> </u>
	Alexandria VA 22314	· I-I : : :
Title or Booking		
Title or Position	CITY STATE ZIF	PCODE
Treasurer	703 - 29!	9 - 8571
 Treasurer: List the name any designated agent (e. 	e and address (phone number optional) of the treasurer of the committee; and the name .g., assistant treasurer).	and address of
	hy A. Koch	
of Treasurer		
Mailing Address	901 N Washington St, Suite 700	
•		
	Alexandria VA 22314	
Title or Position	CITY STATE ZIF	CODE
Treasurer	703 299	9 8571
1		

CITY

STATE

ZIP CODE

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Name of Bank, Depository, etc.

Mailing Address

Theodore V. Koch

Full Name of

Designated Agent

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