SECRETARY OF THE SENATE
11 FEB -9 PM 4:05

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (In full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Blumenthal for Connecticut

ADDRESS (number and street) 777 Summer Street

☐ (Check if address is changed)

Stamford | CT | 06901 -

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

zamore@capcompliance.com

☐ (Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.richardblumenthal.com

☐ (Check if address is changed)

2. DATE MM 02 / DD 02 / YYYY 2011

3. FEC IDENTIFICATION NUMBER C

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 Treasurer Ellen Camhi

Signature of Treasurer Ellen Camhi Date 02 / 03 / 2011

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 Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

11020052597

5. TYPE OF COMMITTEE

Candidate Committee:

(a) [X] 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: Richard Blumenthal

Candidate Party Affiliation: DEM

Office Sought: [ ] House [X] Senate [ ] President

State: CT

District:

(c) [ ] This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate:

Party Committee:

(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 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 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.

Committees Participating in Joint Fundraiser

1. FEC ID number C
2. FEC ID number C
3. FEC ID number C
4. FEC ID number C

11020052698

Write or Type Committee Name

Blumenthal for Connecticut

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Blumenthal for Senate

Mailing Address 777 Summer Street

Stamford (CITY) CT (STATE) 06901 - (ZIP CODE)

Relationship: [ ] Connected Organization [X] Affiliated Committee [ ] Joint Fundraising Representative [ ] Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Judith Zamore

Mailing Address 426 C Street, NE

Washington (CITY) DC (STATE) 20002 - (ZIP CODE)

Title or Position Assistant Treasurer

Telephone number ___ - ___ - ___

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Ellen Camhi

Mailing Address 777 Summer Street

Stamford (CITY) CT (STATE) 06901 - (ZIP CODE)

Title or Position Treasurer

Telephone number ___ - ___ - ___

11020395395

Full Name of Designated Agent: Michael Cacace

Mailing Address: 777 Summer Street

Stamford — CITY | CT — STATE | 06901 - ZIP CODE

Title or Position: Assistant Treasurer

Telephone number: ___ - ___ - ____

9. **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.

Name of Bank, Depository, etc.: Hudson Valley Bank

Mailing Address: 1055 Summer Street

Suite 105

Stamford — CITY | CT — STATE | 06905 - ZIP CODE

Name of Bank, Depository, etc.: PNC BANK

Mailing Address: 650 Pennsylvania Avenue, SE

Washington — CITY | DC — STATE | 20003 - ZIP CODE

11020052790

Full Name of Designated Agent: Judith Zamore

Mailing Address: 426 C Street NE

Washington (CITY) DC (STATE) 20002 - (ZIP CODE)

Title or Position: Assistant Treasurer

Telephone number: - -

9. **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.

Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE -

Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE -

11020952701

Write or Type Committee Name

Blumenthal for Connecticut

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Connecticut Senate 2010

Mailing Address 426 C Street, N.E.

Washington DC 20002 -

CITY STATE ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number - -

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Mailing Address

CITY STATE ZIP CODE

Title or Position

Telephone number - -

11020052702

Write or Type Committee Name

Blumenthal for Connecticut

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Connecticut Senate Victory Fund

Mailing Address 777 Summer Street

Stamford CT 06901 -

CITY STATE ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

CITY STATE ZIP CODE -

Title or Position

Telephone number -

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Mailing Address

CITY STATE ZIP CODE -

Title or Position

Telephone number -

11020050703

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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