RECEIVED
FEC MAIL CENTER
2008 APR 15 PM 2: 30

FEC

STATEMENT OF

FORM 1	OndANIZ	AIION	1	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	Office Use Only
Senate Conservativ	ac Fund.			
otuner conservativ	es fund ; ·		<u> </u>	
ADDRESS (number and street)	P.O. Box 388	<u> </u>		
(Check if address	<u> </u>	<u> </u>		
is changed)	Alexandria:	ليلنينين	VA .	22313
COMMITTEE'S E-MAIL ADDRE	Ess	CITY	STATE	ZIP CODE
		<u> </u>	<u> </u>	
<u> </u>		<u> </u>	<u> </u>	
COMMITTEE'S WEB PAGE AD	DDRESS (URL)			
<u> </u>	<u> </u>	<u> </u>		
1			1 : ! ! ! !	
COMMITTEE'S FAX NUMBER 703 - 281 - 981	7 . 1	•		
2. DATE				
3. FEC IDENTIFICATION N	IUMBER C			
4. IS THIS STATEMENT	K NEW (N) OR	AMENDED (A)		
I certify that I have examined I	this Statement and to the bes	t of my knowledge and belief	it is true, correct	and complete.
				·
Type or Print Name of Treasure		0		
Signature of Treasurer	DAUY!	Ollzen	_Date 4	14 2008
NOTE: Submission of false, error	•	may subject the person signing ION SHOULD BE REPORTED V		the penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-684-1100		FEC FORM 1 (Revised 12/2007)

FEC FORTE (Nevised 12/2007)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information belo	w.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Committee information below.)	omplete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State 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 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 committee is a separate segregated fund.	connected organization is a:
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party
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 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundraiser	
1. FEC ID number C:	Singa kapiningi and inggress of the second o
2. FEC ID number C	:
3. FEC ID number C	and the second s
4. FEC ID number C	to the second of
5. FEC ID number C	time dividue i specificity i regional particle.

		•
FEC Form 1 (Revised	12/2007)	Page 3
Write or Type Committee Nam	ne	
Senate Cons	ervatives Fund	
6. Name of Any Connected	Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fund	iraising Representative
MINT PAC		
		<u> </u>
Mailing Address	P+O Box 25943	
•		
	Allexandria	2313 - :
•	CITY STATE	ZIP CODE
Relationship:		
Connected Organization	Affiliated Committee Leadership PAC Sponsor Joint Fu	ndraising Representative
Full Name Lisa Mailing Address	Lisker 228 S. Washington Street	
	CITY STATE	ZIP CODE
Title or Position		
Assistant Treasu	Telephone number 703	J- <u>549</u> , J- <u> 7705</u>
8. Treasurer: List the name as any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
Full Name of Treasurer Barry	Wynn,	
Mailing Address	359 S. Pine Street	
	P.O. Box:1724	
	Spartanburg : : : : : : SC 2	9302:
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 864,	- 582 - 3356

Г			
FEC Form 1 (Revis	sed 12/2007)		Page 3
Write or Type Committee N	fame		
Senate Con	nservatives Fund		
6. Name of Any Connecto	ed Organization, Affiliated Committee, Leadersi	nip PAC Sponsor or Joint Fu	ndraising Representative
Jim DeMint			
		1 1 1 1 1 1 1 1	!
Mailing Address	P.O. Box 12425		
•			
	Columbia !		29211,
•	CITY	STATE	ZIP CODE
Relationship:			•
Connected Organiza	tion Affiliated Committee X Leaders	nip PAC Sponsor Joint	Fundraising Representative
Full Name Lisa Mailing Address	228 S. Washington Street Suite 115		
	Alexandria	<u> </u>	<u> 22314. </u>
Title or Position	CITY	STATE	ZIP CODE
Assistant Trea	surer	Telephone number 703	<u> - 549 - 7705 </u>
8. Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the tig., assistant treasurer).	reasurer of the committee; an	d the name and address of
Full Name of Treasurer Barr	y, Wynn		
Mailing Address	359 S. Pine Street		
	P.O. Box 1724	<u> </u>	
	Spartanburg	sc	29302
	CITY	STATE	ZIP CODE

864 - 582 - 3356

Telephone number

FE3AN042.PDF

Title or Position

Treasurer | | | | | | | | |

FEC Form 1 (Revised 12/2007)	Page 4
Full Name of Designated Agent Li	sa Lisker	
Mailing Address	228 S. Washington Street	
	Suite 115	
	Alexandria VA CITY STATE	22314 -
Title or Position Assistant Tr	easurer: !	703: - 549: - 7705
Banks or Other Dep	ositories: List all banks or other depositories in which the committee depos	sits funds, holds accounts, rents
safety deposit boxes Name of Bank, Depo	or maintains funds. sitory, etc. schovia:	sits funds, holds accounts, rents
safety deposit boxes Name of Bank, Depo	or maintains funds. sitory, etc.	sits funds, holds accounts, rents
safety deposit boxes Name of Bank, Depo	or maintains funds. sitory, etc. schovia:	sits funds, holds accounts, rents
safety deposit boxes Name of Bank, Depo	or maintains funds. sitory, etc. schovia:	sits funds, holds accounts, rents
safety deposit boxes Name of Bank, Depo	or maintains funds. sitory, etc. achovia:	
safety deposit boxes Name of Bank, Depo	or maintains funds. sitory, etc. achovia;	
safety deposit boxes Name of Bank, Depo	or maintains funds. sitory, etc. achovia;	
safety deposit boxes Name of Bank, Depo	or maintains funds. sitory, etc. achovia;	
safety deposit boxes Name of Bank, Depo Wailing Address Name of Bank, Depo	or maintains funds. sitory, etc. achovia;	
safety deposit boxes Name of Bank, Depo Wailing Address Name of Bank, Depo	or maintains funds. sitory, etc. achovia;	

FE3AN042.PDI

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING D The FEC added this page to the end of this filing to indicate ho	
	Date of Receipt
Hand Delivered	4/15/08
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirma	ation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
Imro	4/15/08
PREPARER (2/2005)	DATE PREPARED
(3/2005)	