Image#	26960667922
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FEC FORM 1		TATEME RGANIZA (See instructio	ATIO		c	Office use only
1. NAME OF COMMITTEE (in f	full)	(Check if name is changed)		nple: If typying, type the lines	12FE4M5	1 1
	RESSIONAL VICT	ORY ÇOMMITTI	ΞE			
<u></u>			<u> </u>			
ADDRESS (number and s		BOX 40177	<u></u> 			
(Check if addre is changed)	ess LLL					20016
COMMITTEE'S E-MAI	L ADDRESS		CITY		STATE	ZIP CODE 🔺
	alcompliance.co	m 				
COMMITTEE'S WEB	PAGE ADDRESS (U	RL)				
N/A						
COMMITTEE'S FAX N	IUMBER					
2. DATE 1.0	/ D D / Y	2006 [°]				
3. FEC IDENTIFICA	TION NUMBER	[C C00	421636		
4. IS THIS STATEM	ENT NEW	/ (N) OR	X	AMENDED (A)		
I certify that I have examin	ned this Statement and	to the best of my kno	wledge an	d belief it is true, correct and	d complete	
Type or Print Name of ⁻	Treasurer	Christopher J. W	/ard			
Signature of Treasurer	Electronically File	d by Christoph	er J. Wa	ırd	Date 1 1	^D 07 ^Y 2006
NOTE: Submission of fal				e person signing this State		s of 2 U.S.C. S437g.
Office Use Only				For further information c Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2003)

_	FEO For i	m 1 (Revised 02/2003)	Page 2
5.	TYPE OF CO	MMITTEE (Check One)	
	(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 ca information below.)	ndidate
	Name of Candidate	1	
	Candidate Party Affiliatio	on Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	L	
	(d)	This committee is a (National, State (or subordinate) committee of the (De Rep	mocratic, ublican,etc.) Party.
	(e)	This committee is a separate segregated fund	
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fur committee.	d or party
6.	Name of Any	v Connected Organization or Affiliated Committee	
L			
	Mailing Addre	ess 228 S WASHINGTON ST STE 115	
		L,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	314 _ _ _
		CITY STATE Z	
	Relationship	Jnt Fundraising Ctte	
	Type of Conne	ected Organization:	
	Corpo	oration Corporation w/o Capital Stock Labor Organizatio	n
	X Mem	bership Organization Trade Association Cooperative	

FEC For	m 1 (Revised 02/2003)			Page 3
Vrite or Type Co				
	NGRESSIONAL VIC			
	f Records: Identify by of Committee books	y name, address, (phone number and records.	optional), and position of the	ne person in
Full Name	Christopher	I. Ward		
Mailing Addre	SS	6302 Massachusetts Ave		
		Bethesda	MD	20816 _
Title or Positic	on ¥	CITY A	STATE	ZIP CODE 🛦
	Treasurer		Telephone number	
name and a	List the name and ac address of any design	dress (phone number optional) of ated agent (e.g., assistant treasure	f the treasurer of the comm r).	ittee; and the
- 11 M I				
Full Name of Treasurer	Christopher	I. Ward		
		I. Ward 6302 Massachusetts Ave		
of Treasurer			<u>MD</u>	20816
of Treasurer	ISS	6302 Massachusetts Ave	<u>MD</u>	20816 ZIP CODE ▲
of Treasurer Mailing Addre	ISS	6302 Massachusetts Ave Bethesda CITY A		
of Treasurer Mailing Addre	ss	6302 Massachusetts Ave Bethesda CITY A	STATE	
of Treasurer Mailing Addre Title or Positio	on ♥ Treasurer	6302 Massachusetts Ave Bethesda CITY A	STATE	
of Treasurer Mailing Addre Title or Position	on ♥ Treasurer	6302 Massachusetts Ave Bethesda CITY A	STATE	
of Treasurer Mailing Addre Title or Position	ss	6302 Massachusetts Ave Bethesda CITY A	STATE	
of Treasurer Mailing Addre Title or Positio Full Name of Designated Agent Mailing Addre	ss	6302 Massachusetts Ave	Telephone number	ZIP CODE A

9.

FEC Form 1 (Revised 02/20	003)	Page 4
Banks or Other Depositories:	List all banks or other depositories in which the committee deposits funds, holds account	s, rents

safety deposit boxes or maintains funds. Name of Bank, Depository, etc.

Wachovia Bank		
7901 Wisconsin Ave		
Bethesda	MD	20814
CITY 🛆		
	7901 Wisconsin Ave	7901 Wisconsin Ave Bethesda

FEC Form 1 (Revised 1/2	2001)	Page 5 / 8	
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. [ADDITIONAL]] Name of Bank, Depository, etc. [ADDITIONAL]]			
BB&T			
Mailing Address	1909 K St, NW		
	Washington		
	CITY 🛆	STATE A ZIP CODE A	

Name of Any Connected Organization or Affiliated Committee	[ADDITIONAL]
Mailing Address	
	VA22314
CITY	STATE ZIP CODE
Jnt Fundraising Ctte Image: Selationship	
Type of Connected Organization:	
Corporation Corporation w/o Capital Stock	Labor Organization
X Membership Organization Trade Association	Cooperative

Image# 26960667927

FEC Form 1 (Revised 1/2001)

Designated Agent		[ADDITIONAL]
Full Name		
Mailing Address		
Title or Position ▼	CITY A	STATE ZIP CODE
	Telep	bhone number

FEC Form 1 (Revised 1/	2001)				Page 7 / 8
Banks or Other Depositories: safety deposit boxes or maintair Name of Bank, Depository, etc.	ns funds.	her depositories in which	the committee d	eposits funds, ho	lds accounts, rents
Mailing Address					
				STATE 🛆	ZIP CODE 🛆
Name of Any Connected Org	anization or Affiliate	d Committee			[ADDITIONAL]
BACHMANN FOR CONGI	RESS				
Mailing Address	BOX 49756				
	BLAINE			MN	55449
		CITY		STATE 🛦	ZIP CODE 🛦
Relationship	ed Ctte				

Туре о	f Connected Organization:		
	Corporation	Corporation w/o Capital Stock	Labor Organization
X	Membership Organization	Trade Association	Cooperative

Image# 26960667929

FEC Form 1 (Revised 1/2001)

Designated Agent		[ADDITIONAL]
Full Name		
Mailing Address		
Title or Position ▼	CITY A	STATE ZIP CODE
	Telephon	e number