Only

STATEMENT OF

PAGE 1 / 4

FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. HANDEL VICTORY COMMITTEE 611 PENNSYLVANIA AVE SE ADDRESS (number and street) #267 (Check if address is changed) WASHINGTON 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS BEN@CROSBYOTT.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 25 2017 C00638494 FEC IDENTIFICATION NUMBER > 3. 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. OTTENHOFF, BENJAMIN, , , Type or Print Name of Treasurer OTTENHOFF, BENJAMIN, , , [Electronically Filed] 04 25 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

	FEC Fo	rm 1 (Revised 02/2009)	Page 2				
		OMMITTEE					
Car	adidate 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				
	ne of didate						
	didate y Affiliatio	Office Sought: House Senate President	State				
(c)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District				
` ,	ne of						
	didate						
Par	ty Con	nmittee:					
(d)			(Democratic, Republican, etc.) Party.				
Pol	itical 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				
			Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)	Ш	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.)					
Joir	nt 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	Committees Participating in Joint Fundraiser					
	1.	HANDEL FOR CONGRESS INC	633362				
	2.	REPUBLICAN NATIONAL COMMITTEE FEC ID number C C000	003418				
	3.	NRCC FEC ID number C C000	75820				
	4.						

FEC Form 1 (Revised 0	2/2009)	Page 3
Write or Type Committee Name		<u>`</u>
HANDEL VICTO	DRY COMMITTEE	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
NONE		
Mailing Address		
-		
	CITY STATE Z	IP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lead	lership PAC Sponsor
. Custodian of Records: Identi books and records.	tify by name, address (phone number optional) and position of the person in posso	ession of committee
OTTENHO Full Name	FF, BENJAMIN, , ,	
Mailing Address	611 PENNSYLVANIA AVE SE	
	# 267	
	WASHINGTON DC 20003	
Title or Position	CITY STATE Z	IP CODE
TREASURER	Telephone number	
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the nam ssistant treasurer).	e and address of
Full Name OTTENHOR	FF, BENJAMIN, , ,	
Mailing Address	611 PENNSYLVANIA AVE SE	
	#267	
	WASHINGTON DC 20003	
Title or Position TREASURER	CITY STATE ZI	P CODE

FEC Form	1 (Revised 02/2009)			Page 4
Full Name of				
Designated Agent				
Mailing Address				
	1			1–1
		CITY	STATE	ZIP CODE
Title or Position				
		Te	lephone number	
safety deposit be Name of Bank,	Depositories: List all bank exes or maintains funds. Depository, etc.	ks or other depositories in which	tne committee deposits funds	
safety deposit be	xes or maintains funds.	BANK	the committee deposits funds	
safety deposit be Name of Bank,	ces or maintains funds. Depository, etc. CHAIN BRIDGE E 1445-A LAUG	BANK		
safety deposit be Name of Bank,	xes or maintains funds. Depository, etc. CHAIN BRIDGE E	BANK		2101
safety deposit be Name of Bank,	ces or maintains funds. Depository, etc. CHAIN BRIDGE E 1445-A LAUG	BANK		
safety deposit be Name of Bank,	ces or maintains funds. Depository, etc. CHAIN BRIDGE E 1445-A LAUG MCLEAN	BANK SHLIN AVE	VA 22	2101
safety deposit be Name of Bank, Mailing Address	ces or maintains funds. Depository, etc. CHAIN BRIDGE E 1445-A LAUG MCLEAN	BANK SHLIN AVE	VA 22	2101
safety deposit be Name of Bank, Mailing Address	Depository, etc. CHAIN BRIDGE E 1445-A LAUG MCLEAN Depository, etc.	BANK SHLIN AVE	VA 22 STATE	2101
safety deposit be Name of Bank, Mailing Address	Depository, etc. CHAIN BRIDGE E 1445-A LAUG MCLEAN Depository, etc.	BANK SHLIN AVE CITY	VA 22 STATE	2101
safety deposit be Name of Bank, Mailing Address	Depository, etc. CHAIN BRIDGE E 1445-A LAUG MCLEAN Depository, etc.	BANK SHLIN AVE CITY	VA 22 STATE	2101
safety deposit be Name of Bank, Mailing Address	Depository, etc. CHAIN BRIDGE E 1445-A LAUG MCLEAN Depository, etc.	BANK SHLIN AVE CITY	VA 22 STATE	2101