

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATE

07 OCT 26 PM 4: 51

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

KENTUCKY REPUBLICAN VICTORY COMMITTEE

ADDRESS (number and street)

PO BOX 365

(Check if address is changed)

MCLEAN

VA

22101

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

tim@complianceconsultingva.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

MM / DD / YYYY 10 / 22 / 2007

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

TIM BEALL

Signature of Treasurer

[Handwritten Signature]

Date

MM / DD / YYYY 10 / 26 / 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

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 02/2003)

RECEIVED FEDERAL ELECTION COMMISSION OCT 26 2007

27039565029

5. TYPE OF COMMITTEE (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 candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State  District

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

Name of Candidate \_\_\_\_\_

- (d)  This committee is a  (National, State (or subordinate) committee of the  (Democratic, Republican, etc.) Party.

- (e)  This committee is a separate segregated fund

- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

**RUDY GIULIANI PRESIDENTIAL COMMITTEE INC**

Mailing Address **C/O JOHN GROSS**

**PROSKAUER ROSE LLP 1585 BROADWAY**

**NEW YORK NY 10036**

**CITY STATE ZIP CODE**

Relationship **JOINT FR PARTICIPANT**

Type of Connected Organization:

- Corporation  Corporation w/o Capital Stock  Labor Organization
- Membership Organization  Trade Association  Cooperative

27039560040

Write or Type Committee Name

**KENTUCKY REPUBLICAN VICTORY COMMITTEE**

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 **TIM BEALL**

Mailing Address **PO BOX 365**

**MCLEAN VA 22101**

Title or Position **TREASURER** 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 **TIM BEALL**

Mailing Address **PO BOX 365**

**MCLEAN VA 22101**

Title or Position **TREASURER** CITY STATE ZIP CODE

Telephone number

Full Name of Designated Agent **CABELL HOBBS**

Mailing Address **PO BOX 365**

**MCLEAN VA 22101**

Title or Position **ASST. TREASURER** CITY STATE ZIP CODE

Telephone number

27039560041

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.

WACHOVIA

Mailing Address

1753 PINNACLE DRIVE

3RD FLOOR

MCLEAN

VA

22102

CITY Δ

STATE Δ

ZIP CODE Δ

27039560042

**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.

[ ADDITIONAL ]

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ ADDITIONAL ]

REPUBLICAN PARTY OF KENTUCKY

Mailing Address

PO BOX 1068

FRANKFORT

KY

40602

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

JOINT FR PARTICIPANT

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

27039560043

**Designated Agent**

**[ ADDITIONAL ]**

Full Name

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number

27039560044

**Federal Election Commission**  
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**PREPARER**  
 (3/2005)

*10/30/07*  
**DATE PREPARED**

27039560045