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FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATE

09 APR 15 AMII: 11

	<u> </u>	(See instruction				Office use only
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If over the line	typying, type es	12FE4M5	
ARKANSAS	OLORADO VICT	ORY			1111	ليبيبي
ADDRESS (number and	street) 426	C STREET NE	1111			
(Check if addres	s LLL				1111	
is changed)	WA	SHINGTON		لبب	LPC L	20002 -
		,	CITY.		STATE	ZIP CODE
COMMITTEE'S E-MA	IL ADDRESS (Pleas	se provide only one	e-mail address)			
(Check if addres	s judy	/@zamoregroup	.com		1111	
X is changed)						
		•				,
COMMITTEE'S WEB	PAGE ADDRESS (JRL)				
(Check if address is changed)	s 11	1.1.1.1.1.1		سسسا		
	ىيا				1111	
2. DATE MO.4 3. FEC IDENTIFIC 4. IS THIS STATE	ATION NUMBER	Y 20,0 9, Y	C C004589	84 MENDED (A)]	
I certify that I have exar	nined this Statement ar	nd to the best of my kn	owledge and belief	it is true, correct ar	nd complete	
Type or Print Name o	of Transcusor	Judith Zamore				
туре от глистание С	n neasurer	101		~		
Signature of Treasur	er Electronical A	ned by Judith 2	Imore W		Date 0,4	15 7 2009
NOTE: Submission of f		omplete information ma				es of 2 U.S.C. S437g.
Office Use Only			Federa Toll Fr	rther Information of al Election Commissee 800-424-9530 202-694-1100		FEC FORM 1 (Revised 02/2009)

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Friends of Blanche Lincoln

2.

This committee is a principal campaign committee. (Complete the candidate information below.)

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TYPE OF COMMITTEE (Check One)

Candidate Committee:

(a)

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	DO VICTORY		
6. Name of Any Connected C	rganization, Affiliated Committee, Joint Fundra	ising Representative, or Leade	ership PAC Sponsor
NONE			
Mailing Address			
		• <u> </u>	
		ا ليا ليي	<u> </u>
	: CITYA	STATE ▲	ZIP CODE
Relationship: Connected Organization	on Affiliated Committee Joint F	undraising Representative	Leadership PAC Sponsor
possession of Committe Full Name Mailing Address	PO Box 76187	<u> </u>	1. ! 1 1 1 1 1 1
	Washington	DC	20013 _
Title or Position ♥	CITY &	STATE A Telephone number 202	ZIP CODE & - 489 - 3024
Treasure		•	
8. Treasurer: List the name	e and address (phone number optional) of ny designated agent (e.g., assistant treasure		
Treasurer: List the name name and address of ar Full Name			
Treasurer: List the name name and address of ar Full Name	ny designated agent (e.g., assistant treasure		
8. Treasurer: List the name name and address of ar Full Name of Treasurer	ny designated agent (e.g., assistant treasure		
Treasurer: List the name name and address of ar Full Name of Treasurer	ny designated agent (e.g., assistant treasure th Zamore PO Box 76187	r).	ee; and the

FEC Form 1 (Revised 02/2009)

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PAMELA B. GAVIN SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7118 PHONE: (202) 224-0322

United States Senate

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