## 2020-10-21-05-00547090

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2020 OCT 15 AM 8: 37

NAME OF     COMMITTEE (in full)		(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Jordan Victory Fund			_1_1_1_1_1_1_1_1_1	1 1 1 1 1 .	
ADDRESS (number and street)	20 G	alli Drive STE	A	<u> </u>	
(Check if address	لبا				
is changed)	Nova	t <u>q                                    </u>		CA 94	94-95731 -
		C	CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	S (Pleas	se provide only one e-	mail address)		
(Check if address	nwan	ren@wepacca.com			
is changed)	لبا	<u> </u>			
COMMITTEE'S WEB PAGE ADD	RESS (	URL)			
(Check if address	لـــــا				
is changed)	للا	11111		11111	
2. DATE 10 08	<b></b>	2020	· · · · · · · · · · · · · · · · · · ·		
3. FEC IDENTIFICATION NU	MREH	<u> </u>			
4. IS THIS STATEMENT	NE	W (N) OR	AMENDED (A)		
I certify that I have examined th	is Stater	ment and to the best	of my knowledge and belief i	it is true, correct an	od complete.
Type or Print Name of Treasurer		Hancy	L. Warr,	en	
Signature of Treasurer		an Mu	/	Date U	08 A020
NOTE: Submission of false, errone			may subject the person signing		penalties of 2 U.S.C. §437g.
Office Use			For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

FEC Fo	orm 1 (Revised 02/2009)	Page 2
TYPE OF C	COMMITTEE	
Candidate	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	v.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Co information below.)	mplete the candidate
Name of Candidate		
Candidate Party Affiliat	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	nmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Pa
Political A	Action Committee (PAC):	· · · · · · · · · · · · · · · · · · ·
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization i
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or pa
	In addition, this committee is a Lobbyist/Registrant PAC.	

(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	Paulette for Senate                       FEC ID number C C00738757
2.	Idaho State Democratic Party           FEC ID number C C00010439
3.	FEC ID number C

FEO Form 4 (Posico	A 00/0000\	Page <b>3</b>
FEC Form 1 (Revise Write or Type Committee Na		
Jordan Victory Fund		
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundralsing Representative, or Le	eadership PAC Sponsor
None		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Tomperate:		WARES.
7. Custodian of Records: keep books and records.	dentify by name, address (phone number optional) and position of the person	in possession of committee
Full Name Nancy	/ L Warren	
Mailing Address	20 Galli DR STE A	
Walling / Wallogs		
	Novato	94949 .   _
		<u> </u>
Title or Position	CITY STATE	ZIP CODE
Custodian of Reco	ords Telephone number 415	]- <u>[884</u> ]- <u>[5500</u>
Treasurer: List the name any designated agent (e.g.)	and address (phone number optional) of the treasurer of the committee; and i., assistant treasurer).	the name and address of
Full Name of Treasurer Nancy	L Warren	
Mailing Address	20 Galli Drive STE A	
		<u> </u>
	Novato	94949
	CITY STATE	ZIP CODE
Title or Position	1	
Treasurer	Telephone number 415	<u> -  884  -  55</u> 00

CITY

ZIP CODE

STATE

Mailing Address

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Reference #1: Jordan Victory Fund FEC 1

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## Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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Other (Specify):	Date of Receipt or Postmarked
Spur	10/20/20
PREPARER (3/2015)	DATE PREPARED