## FEC FORM 1

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Office

Use

Only

## STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

17 APR -7 PM 12: 46

FEC FORM 1

(Revised 02/2009)

FORM 1 Office Use Only Example: If typing, type (Check if name 12FE4M5 NAME OF over the lines. is changed) COMMITTEE (in full) Stabenow Warren Victory Fund ADDRESS (number and street) (Check if address is changed) ZIP CODE STATE CITY COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) zamore@capcompliance.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE FEC IDENTIFICATION NUMBER AMENDED (A) OR NEW (N) IS THIS STATEMENT I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. **Judith Zamore** Type or Print Name of Treasurer Date Signature of Treasurer 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.

For further Information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

	FEC F	orm 1 (Revised 02/2009) Page 2					
5. T	YPE OF	COMMITTEE					
C	andidat	te Committee:					
(a	a)	This committee is a principal campaign committee. (Complete the candidate information below.)					
(b	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Completinformation below.)						
_	lame of Candidate	<u> </u>					
_	andidate arty Affiliat	tion Office State Sought: House Senate President District					
(c	:)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
_	ame of andidate						
P	arty Cor	mmittee:					
(d	) [	This committee is a (National, State (Democratic, Republican, etc.) Part					
P	Political Action Committee (PAC):						
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is					
		Corporation Corporation w/o Capital Stock Labor Organization					
		Membership Organization Trade Association Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.					
<b>(f)</b>	) [	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or part committee. (i.e., nonconnected committee)					
		In addition, this committee is a Łobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Jo	int Fund	draising Representative:					
(g)	$\boxtimes$	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.					
	Com	mittees Participating in Joint Fundraiser					
		Stabenow for US Senate             FEC ID number C 00344473					
	1. 2.	Elizabeth for MA Inc					
	3.						
	4.	FEC ID number					

Page	3
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Write or Type Committee Name

Stabenow Wai	ren Victory Fund							
6. Name of Any Connecte	d Organization, Affiliated Committee, Joint F	undraising Representative,	or Leadership PAC Sponsor					
None		<u>                                     </u>						
Mailing Address								
	CITY	STATE	ZIP CODE					
Relationship: Conne	cted Organization Affiliated Committee	Joint Fundraising Representa	tive Leadership PAC Sponso					
<ol> <li>Custodian of Records: books and records.</li> </ol>	dentify by name, address (phone number op	tional) and position of the pe	erson in possession of committee					
Full Name Judi	th Zamore	<u> </u>						
Mailing Address	918 Penņsylvania Ave ŞE	<u> </u>						
		1 1 1 1 1 1 1 1 1 1 1						
	Washington	<u>DC</u>	20003					
Title or Position	CITY	STATE	ZIP CODE					
Treasurer		Telephone number	<u></u>					
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 Judi								
Mailing Address	918 Pennsylyania Aye SE		11111111					
	Washington city	DC	20003					
Title or Position  Treasurer		Telephone number						

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· · · · · · · · · · · · · · · · · · ·									
Full Name of Designated Agent	Kristin S	olander,	<u>                                      </u>	1 1 1 1	1 1 1 1 1			.1	<del></del>
Mailing Address	ا	18 Pennsy	/Ivania Ave	e,SE	<del>                                      </del>			11.1.	<u> </u>
	L			1.1.1.	111		11.1		<u> </u>
	7	<b>Vaşhington</b>	CITY	1111	لـــــا	DC   STATE	2000	ZIP COE	L E
Title or Position [Assistant ]	freasurer <sub>i</sub>		ı		Telephone nu				
Banks or Other	r Depositories:	List all banks of	or other deposi	tories in whi	ch the commi	ttee deposits	funds, hold	ds accoun	ts, rents
safety deposit b Name of Bank,									
	[Amalga	ηated Bar	nk	1   1	<u> </u>			111	111
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	Depository, etc	1825,K,St Vaşhingtor	NW			STATE		ZIP COI	
	Depository, etc	1825,K,Sţ	NW			STATE		ZIP COI	
Name of Bank,	Depository, etc	1825,K,Sţ	NW			STATE		ZIP COI	
Name of Bank,	Depository, etc	1825,K,Sţ	NW			STATE		ZIP COI	

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## United States Senate

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