

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

**RECEIVED
FEDERAL ELECTION
COMMISSION
REPORTS ANALYSIS
DIVISION**

3/20/96

3. FEC IDENTIFICATION NUMBER

Mar 29 2 12 PM '96

1. NAME OF COMMITTEE (Full) Check if name is changed
New Jersey Victory '96
 a. Number and Street Address Check if address is changed
430 South Capitol Street, S.E.
 c. City, State and ZIP Code
Washington, D.C. 20003

4. IS THIS STATEMENT AN AMENDMENT?
 YES NO

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 _____ State District _____
 - (c) This committee supports/opposes only one candidate _____ (name of candidate) and is NOT an authorized committee.
 - (d) This committee is a _____ (National, State or Subordinate) committee of the _____ Party (Democratic, Republican, etc.)
 - (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 a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Democratic National Committee	430 South Capitol Street, S.E. Washington, D.C. 20003	Joint Fundraising
Torricelli for U.S. Senate, Inc.	P.O. Box 1865 S. Hackensack, NJ 07606	Joint Fundraising
New Jersey Democratic State Committee	150 W. State Street Trenton, NJ 08608	Joint Fundraising

Type of Connected Organization
 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

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	Mailing Address	Title or Position
Bradley K. Marshall	430 South Capitol Street, S.E. Washington, D.C. 20003	Assistant Treasurer

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	Mailing Address	Title or Position
R. Scott Pastrick	430 South Capitol St., S.E.	Treasurer
Bradley K. Marshall	Washington, D.C.	Assistant Treasurer

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.	Mailing Address and ZIP Code
NationsBank, N.A.	730 15th Street, N.W. Washington, D.C. 20005

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 <u>R. Scott Pastrick</u>	SIGNATURE OF TREASURER 	DATE <u>3-22-96</u>
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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 202-376-3120

FEC FORM 1
(revised 4/87)

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE
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3/29/96

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E.F.
PREPARER

3/29/96
DATE PREPARED

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