

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

OPERATIONS CENTER

2006 APR 15 A 11:30

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Davis-Kentucky Victory Committee

ADDRESS (number and street)

228 S. Washington St., Ste. 115

(Check if address is changed)

Alexandria

VA

22314

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

kdavis@hdafeec.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

7036840683

2. DATE

MM 04

DD 14

YYYY 2006

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

Keith Davis

Signature of Treasurer

Keith A. Davis

Date

MM 04

DD 14

YYYY 2006

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

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)

26039840170

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

GEOFF DAVIS FOR CONGRESS _____

Mailing Address 3161 Dixie Highway _____

Suite F _____

Erlanger KY 41018 _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Jnt Cmt Participant _____

Type of Connected Organization:

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

26039040171

Write or Type Committee Name

Davis-Kentucky 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 **Keith Davis**

Mailing Address **228 S. Washington St., Ste. 115**

Alexandria VA 22314

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

703 549 7705
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 **Keith Davis**

Mailing Address **228 S. Washington St., Ste. 115**

Alexandria VA 22314

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

703 549 7705
Telephone number

Full Name of Designated Agent **Lisa Lisker**

Mailing Address **228 S. Washington St., Ste. 115**

Alexandria VA 22314

Title or Position **Asst. Treasurer** CITY STATE ZIP CODE

703 549 7705
Telephone number

26039040172

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.

BB&T

Mailing Address

1909 K St., NW

Washington DC 20006 -

CITY Δ

STATE Δ

ZIP CODE Δ

26039640173

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address


Title or Position CITY STATE ZIP CODE

Telephone number

26039040175

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 4/15/06
<input type="checkbox"/> USPS First Class Mail	Postmarked
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

	4/15/06
PREPARER	DATE PREPARED

26039040176