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FEC FORM 1		_	TATEM RGANI				O	lice Use Only	, <u> </u>	• • • • • • • • • • • • • • • • • • •
1. NAME OF COMMITTEE (In	(UH)		(Check if name is changed)		nple:If typing, type the lines.	31251	£4M5	Harrie Alexandra		
Jeb Hensar	ing '	yictor	y Fund		<u> </u>	سلسلسل	1111		لللث	لـــ
أستنت	سلسلسا	1			111111	<del></del>			<del></del>	لب
ADDRESS (number a	nd street)	7315	Wiscons	in Ave	nue : : : :		<del></del>		نللن	لب
(Check if address is changed)		Suit	e 310 Ea	ist i		14.1.1.			لللا	لب
ls changed)		Beth	rėadą i i		1-1-1-1-1	] [MD	] [50	814	1-1-1-1	لب
				CITY		STATE		ZIP (	CODE	
COMMITTEE'S E-MA	IL ADDA	ESS (Please	e provide only o	ne e-mail add	iress)					
(Check if address is changed)	infe	фсапраіс	gnfinar	cial.com	1111	لسلسلسا		111	لب	
		سسا								
COMMITTEE'S WEB	PAGE A	.DDAESS (U	IRL)							
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is changed)		سب	<u> </u>	1111		1111	لللن		اسنالسا	لـــا
2. DATE 06	] [	6 2	011							
3. FEC IDENTIFIC	CATION (	NUMBER	C	terráncolium h	en franksarkender					
4. IS THIS STATE	MENT	NEW	r (N) OR		AMENDED (A	<b>v</b>			····	
i certify that I have a	varnined	this Statem	ent and to the l	best of my k	nowledge and beli	lei it is true, d	correct and	l complete.		
Type or Print Name (	of Theasu	Bren	nda Pejo	vich						
Signature of Treasure	a		//			Date		[7,7]	20	//
NOTE: Submission of	ialse, erro	-	=		oct the person sign JLO SE REPORTE	-		penalties of	2 U.S.C. §	437g.
Office					For further informative Federal Election Cons			FEC FO	)RM 1	

	Office	l B	For further information contact
	Use	1 1	Federal Election Commission Toll Free 800-424-9530
_	Only		Local 202-894-1100

(Revised 02/2009)

	FEC Fo	orm 1 (Revised 02/2009)	Page 2
•	· · · · - · ·	COMMITTEE e Committee:	
	(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. (Cominformation below.)	plete the candidate
	Name of Candidate		
	Candidate Party Affiliati	Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District (seculoses)
	Name of Candidate		
	Party Con		
	(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
	Political A	Action Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
		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 secommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lebbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint Fund	draising Representative:	
	(g) X	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	Friends of Jeb Hensarling       FEC ID number C 003	70650
	2.	Jobs   Economy & Budget Fund       FEC ID number C 004	20695
	<b>3</b> .	National Republican Congressional Committeet ID number C 000	75820 
	4	I : I I I I I I I I I I I I I I I I I I	

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Write or Type Committee Nam		- 252 -
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
		<del>'                                    </del>
Mailing Address		
<b>9</b>		1 1 1 1 1 1
		<b> - </b>
	CITY STATE	ZIP CODE
Relationship: Connecte	od Organization Affiliated Committee Joint Fundraising Representative Le	adership PAC Sponso
<b>6.26.9</b>	CARRIER NOW ON	
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	ntify by name, address (phone number optional) and position of the person in po	ssession of committee
Full Name Campa	ign Financial Services	1 1 1 1 1 1
Mailing Address	7315 Wisconsin Avenue	
	Suite 310 East	
	Bethesda [2081	4
Title or Position	CITY STATE	ZIP CODE
Custodian, of, R	eçords Telephone number 301 - 6	554 - 3220
<ol><li>Treasurer: List the name ar any designated agent (e.g.,</li></ol>	nd address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	ame and address of
Full Name of Treasurer  Brend	a, Pejqvich	1.1.1.1.1.1
Mailing Address	[7315, Wisconsin Avenue, , , , , , , , , , , , , , , , , , ,	11111
	Suite   310   Fast	
	Bethesda MD 2081	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number [301, ]-[6	54  - 3220

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**Proof** 

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PREPARER (3/2005)

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