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FEC FORM 1

STATEMENT OF ORGANIZATION

09 APR-9 PM 2:21
Office use only

FORM 1	ORGANIZ	ATION	74	2:21
1 Ortin 1	(See instruction	ons)		ffice use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
NORTH DAKO	TA-OREGON VICTORY FUND			<u> </u>
ADDRESS (number and s	P.O. BOX 1174		44444	
(Check if address		<u> </u>	1 1 1 1 1 1	
is changed)	SPRINGFIELD	LYA L	22151
		CITY▲	STATE	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one	e-mail address)		
(Check if address is changed)	wwburns@earthlink	.net 	<u>. l . l . l . l . l . l . l . l . l . l</u>	
is clianged)		111111		
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
(Check if address is changed)	NONE			
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3. FEC IDENTIFICA	TION NUMBER	C		
4. IS THIS STATEM	ENT X NEW(N) OR	AMENDED (A)	ormanics#E	
4. ISTITISSTATEW	LINI (N) OK	AWENDED (A)		
hand had be a second				
I certify that I have examin	ned this Statement and to the best of my kno	wledge and belief it is true, correct	and complete	
Type or Print Name of	Treasurer DON SCHIMANS	<u>KI</u>		·
Signature of Treasurer	Darle PA	shemende	Date 0.4	0.9 2008
NOTE: Submission of fals	e, erroneous, or incomplete information may			f 2 U.S.C. S437g.
	ANY CHANGE IN INFORMAT	TION SHOULD BE REPORTED	WITHIN 10 DAYS	
Office Use Only		For further information Federal Election Commi Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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WHITNEY WYATT BURNS

Full Name of Designated

9020140200

PAMELA B. GAVIN SUPSAINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510–7118 PHONE: (202) 224–0322

United States Senate

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