□ Urgent □ For Review □ Please Co	mment 🗆 Please Reply 🗀 Please Recycle
Re: Form (cc:
Phone:	Date: 11/10/10
Fax: 202-219-0174	Pages: 5 including cover
To: FEC Public Records Office	From Melodic Johnson / larmer Victory Fund

Comments:

Please find attached the Form I for the Harmer Victory Fund.

The original was sent in via fedEx and was apparently lost in processing. Please accept this fax in place of the original and process for issuance of the committee 11> number.

If any additional tiling methods are required, please contact me at 240.723-9455.

"Thank you.

Melodie Johnson

Treasurer

97%

FEC FORM 1

STATEMENT OF ORGANIZATION

F	FORM 1	ORGANIZATION	1
•	O 11111	(See instructions)	Office use only
1.	NAME OF COMMITTEE (In I	(Check if name Example: If typying, typu luli) Schanged) over the lines	12FE4M5
لـا	Harmer Victor	y Fund	
سا			
ADI	DRESS (number and :	PO BOX 365	
1~1	(Check If address		
ļ	is changed)	MCLEAN	VA 22101
		CITY	STATE ZIP CODE A
co	MMITTEE'S E-MAI	IL ADDRESS (Please provide only one e-mail address)	
	(Check if address	compliance@complianceconsultingya.com	
<u> </u>	is changed)		
co	MMITTEE'S WEB	PAGE ADDRESS (URL)	
· ·	(Check if address	NONE	
أسيأ	is changed)		
2.	DATE 4	1018 / 2010	
	DATE 10	and the same to the earth of the same of t	
3.	FEC IDENTIFICA	ATION NUMBER C C C C C C C C C C C C C	
4,	IS THIS STATEN	MENT X NEW (N) OR AMENDED (A)	
	div that I have exam	ined this Statement and to the boat of my knowledge and belief it is true, correct a	and complete
	and the state of t		TO COMPLETE
Ту	pe or Print Name of	Treasurer Melodia JOHNSON	The second secon
Sig	gnature of Treasure	Melodiefohrson	Date 10 12 7 20,10
NO	TE: Submission of Is	alse, erroneous, or incomplete information may subject the person signing this Ste ANY CHANGE IN INFORMATION SHOULD BE REPORTED	
	Office Use Only	For further information Foderal Election Commit Toll Free 800-424-9330 Lecni 202-694-1100	Rajon FEC FORM 1

p.03

02:41AM

	۶	FEC Fo	Form 1 (Revised 02/2009)	Page 2	
5.	TYPE OF COMMITTEE (Check One)				
٠.		Candidate Committee:			
	(v)	generally described			
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate	
	Name Candi		! <u></u>		
	Candi Party	idate Affiliatio	Office House Senate President	State State	
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name Cand	-		<u></u>	
	Party	Comm	nilitee:		
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.	
	Politi	cal Acti	ilon Committee (PAC):		
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connec	ted organization is at	
		yer/refelle);	Corporation Corporation w/o Capital Stock	abor Organization	
			would transfer transf		
			Mombership 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 segregated fund or party committee. (i.e., nonconnected committee)			led fund or party	
			In addition, this committee is a Lobbyist/Registrant PAC.		
			- COLANDA - Alman resp		
			In addition, this committee is a Leadership PAC. (Identity aponsor on line 6.)		
	Joint Fundraising Representative:				
	(9)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political	
	(h)		This committee collects contributions, pays fundreising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political	
	Committees Participating in Joint Fundralser				
			FRIENDS OF DAVID HARMER FEC ID number C C0046	51657 51657	
			2. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE FEC ID number C C0007	75820	
				in in my and the second se	
			4. FEC ID number C	o pieto giiriiing Wan ang at at ag internag Escretog.	

Write or Type Committee Name Harmer Victory Fund Name of Any Connected Organization, A NONE Mailing Address Relationship: Connected Organization Custodian of Records: Identify by na possession of Committee books and Full Name Mailing Address Title or Position ASSISTANT TREASI 8. Tressurer: List the name and address name and address of any designate Full Name of Treasurer MELODIE JOHN Mailing Address	fillated Committee, Joint Fundralsh		ship PAC Sponsor
Mailing Address Relationship: Connected Organization Custodian of Records: Identify by na possession of Committee books and CABELL HOBBS Full Name Mailing Address Title or Position V ASSISTANT TREASI 8. Treasurer: List the name and address name and address of any designate of Treasurer MELODIE JOHN			ship PAC Sponsor
Mailing Address Relationship: Connected Organization Custodian of Records: Identify by na possession of Committee books and CABELL HOBBS Full Name Mailing Address Title or Position ASSISTANT TREASI Treasurer: List the name and address name and address of any designate of Treasurer MELODIE JOHN	CITYA		
Relationship: Connected Organization Custodian of Records: Identify by na possession of Committee books and Full Name Mailing Address Title or Position ASSISTANT TREASI Treasurer: List the name and address name and address of any designate of Treasurer MELODIE JOHN	LI L		
Relationship: Connected Organization Custodian of Records: Identify by na possession of Committee books and CABELL HOBBS Full Name Mailing Address Title or Position ASSISTANT TREASI ASSISTANT TREASI Treasurer: List the name and address name and address of any designate of Treasurer MELODIE JOHN	CITYA		
Custodian of Records: Identify by na possession of Committee books and CABELL HOBBS Full Name CABELL HOBBS Mailing Address Title or Position V ASSISTANT TREASI Treasurer: List the name and address name and address of any designate of Treasurer MELODIE JOHN	LI L	<u></u>	
Custodian of Records: Identify by na possession of Committee books and CABELL HOBBS Full Name CABELL HOBBS Mailing Address Title or Position V ASSISTANT TREASI Treasurer: List the name and address name and address of any designate of Treasurer MELODIE JOHN	CITY ≜	با لیا لیہ	<u> </u>
Custodian of Records: Identify by na possession of Committee books and CABELL HOBBS Full Name CABELL HOBBS Mailing Address Title or Position V ASSISTANT TREASI Treasurer: List the name and address name and address of any designate of Treasurer MELODIE JOHN	CITYA		
Custodian of Records: Identify by na possession of Committee books and CABELL HOBBS Full Name CABELL HOBBS Mailing Address Title or Position V ASSISTANT TREASI Tressurer: List the name and address name and address of any designate of Treasurer MELODIE JOHN		STATE A	ZIP CODE
Custodian of Records: Identify by na possession of Committee books and CABELL HOBBS Full Name CABELL HOBBS Mailing Address Title or Position ASSISTANT TREASI Treasurer: List the name and address of any designate of Treasurer MELODIE JOHN	garant	j=m*j	
Full Name CABELL HOBBS Full Name Mailing Address Title or Position ASSISTANT TREASI Treasurer: List the name and address name and address of any designate of Treasurer MELODIE JOHN	Affiliated Committee	ndraising Representative	Leadership PAC Sponsor
ASSISTANT TREASION AND ADDRESS OF ANY DESIGNATE Full Name of Treasurer MELODIE JOHN	·	and the second s	
ASSISTANT TREAS	MCLEAN	VA	22101
Full Name of Treasurer MELODIE JOHN	CITY A	STATE	ZIP CODE A
name and address of any designate Full Name of Treasurer MELODIE JOHN	JRER T	dephone number	— 1H 1 ₁
of Treasurer MELODIE JOHN			tee; and the
Mailing Address	SON		ريانية الرواية و ((۱۹۱۱ - ۱۹۱۱ - ۱۹۱۱ - ۱۹۱۹ اليام
	PO BOX 365		langer to est top a mainly a mainly a mainly and a major and a
**************************************	172/11/1/17 1937 1937 1937 1937 1937 1937 1937 19	VA _	22101
Title or Position ▼	MCLEAN	STATEA	ZIP CODE &
TREASURER	MCLEAN CITY A		4F \$#

Full Name of Designated Agent	CABELL HOBBS	Julius record	. Autoria de la constanta de l
Mailing Address	PO BOX 365		A & Advanda and an annual and an and an all an annual and an annual an annual and an annual and an annual and an annual and an annual an a
	MCLEAN	VA	22101 -
Title or Position 🔻	CITYA	STATE 4	ZIP CODE A
ASSIST	FANT TREASURER	lephone number	_
Banks or Other Deposit safety deposit boxes or m Name of Bank, Depositor	nzintains funds.	e committee deposits funds,	holds accounts, rents
safety deposit boxes or m Name of Bank, Depositor	naintains funds. ry, etc. BT	e committee deposits funds,	holds accounts, rents
safety deposit boxes or m Name of Bank, Depositor	nzintains funds. ry, etc.	e committee deposits funds,	holds accounts, rents
safety deposit boxes or m Name of Bank, Depositor	naintains funds. ry, etc. BT	e committee deposits funds,	holds accounts, rents
safety deposit boxes or m Name of Bank, Depositor	naintains funds. ry, etc. BT	e committee deposits funds,	holds accounts, rents
safety deposit boxes or m Name of Bank, Depositor	nzintains funds. ry, etc. BT 300 S WASHINGTON ST		
safety deposit boxes or m Name of Bank, Depositor	naintains funds. ry, etc. BT 300 S WASHINGTON ST ALEXANDRIA CITY 4		
safety deposit boxes or m Name of Bank, Depositor Bi Mailing Address	naintains funds. ry, etc. BT 300 S WASHINGTON ST ALEXANDRIA CITY 4		
safety deposit boxes or m Name of Bank, Depositor Bi Mailing Address	naintains funds. ry, etc. BT 300 S WASHINGTON ST ALEXANDRIA CITY 4	YA STATE A	22314
safety deposit boxes or m Name of Bank, Depositor Mailing Address Name of Bank, Depositor	ngintains funds. ry, etc. 300 S WASHINGTON ST ALEXANDRIA CITY 4	YA STATE A	22314
safety deposit boxes or m Name of Bank, Depositor Mailing Address Name of Bank, Depositor	ngintains funds. ry, etc. 300 S WASHINGTON ST ALEXANDRIA CITY 4	STATE A	22314

P.05

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.				
The FEC added this page to the end of this filling to indicat	e now it was received.			
Hand Delivered	Date of Receipt			
USPS First Class Mail	Postmarked			
USPS Registered/Certified	Postmarked (R/C)			
	Postmarked			
USPS Priority Mail Delivery Confi	rmation [™] Label			
USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Receipt or Postmarked			
The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.				
N/A PREPARER	N/A DATE PREPARED			
(5/2004)				