Image# 11931539241 PAGE 1 / 4

FEC FORM 1		_	TATEN RGAN									Offi	ce Us	e Onl	y			
1. NAME OF COMMITTEE (in	n full)	,	Check if nams changed)		Example over the		ing, ty	/pe	12	2FE	4M5							
Nevada Se	enate '	Victor	y Fund	<u> </u>														
ADDRESS (number a	nd street)	P.O. Box	(1174															
(Check if ac is changed)		Springfie	eld						V	′A		2215	51]-			
				CITY	Y				STA	ATE			Ž	ZIP (COD	Е		
COMMITTEE'S E-MA	AL ADDRES		provide only s@earthlink.n		l addres	ss)												
(Check if is change																		
io onango	۵)																	
COMMITTEE'S WEB	PAGE ADD	RESS (UI	RL)															
(Check if is change																		_
Ü	,																	
2. DATE 09	9 25		2011															
3. FEC IDENTIFIC	CATION NU	IMBER	C	C0050)1668													
4. IS THIS STATE	MENT X	NEW	(N) O	R		AME	NDED	(A)										
l certify that I have ε	examined th	is Stateme	ent and to the	best of r	my knov	vledge	and b	pelief	it is tru	ie, c	orrect	and	сотр	olete.				
Type or Print Name	of Treasurer	Tamara	Beatty Peters	son														
Signature of Treasure	<i>Tamara</i> er	Beatty Pete	rson		[El	ectronic	cally F	iled]	Date	•	09	M /	2	D 5	/ Y	20)11	Υ
NOTE: Submission of			omplete inform	-	•								enalt	ies o	f 2 L	J.S.C.	§437	∕g.
Office					For	further	inforn	nation	contact	:			FFC		OP.	M 1		_

	Office Use		For further information contact: Federal Election Commission Tell Free 200 424 0520	FEC FORM 1
<u> </u>	Only		Toll Free 800-424-9530 Local 202-694-1100	(Revised 02/2009)

F	EC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Can	didate	Committee:	
(a)	Ш	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. (Compinformation below.)	lete the candidate
Name Candi			
Candi Party	date Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Part	y Com	nmittee:	
(d)		· · · ·	Democratic, depublican, etc.) Party.
Polit	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a:
		Corporation 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 seg committee. (i.e., nonconnected committee)	regated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Fund	raising Representative:	
(g)	X	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.	o 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.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	BERKLEY FOR SENATE FEC ID number C C003	25738
	2.	NEVADA STATE DEMOCRATIC PARTY FEC ID number C C0020	08991
	3.	FEC ID number	
	4.		

	EEC Form	1 (Pavisad 02/2000)	Page 3
Write		1 (Revised 02/2009) nmittee Name	raye 3
		Senate Victory Fund	
		Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
NON	-		
Mai	iling Address		
		CITY STATE ZI	IP CODE
Rel	ationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leader	ership PAC Sponsor
	stodian of Re	Records: Identify by name, address (phone number optional) and position of the person in posserds.	ession of committee
Eul	I Name	Whitney W. Burns	.
	iling Address	P.O. Box 1174	
iviai	mily Addiess		
		Springfield VA 22151	
Title	e or Position	CITY STATE ZI	P CODE
A	ssistant Treas	surer Telephone number	
3. Tre a	asurer: List the designated a	the name and address (phone number optional) of the treasurer of the committee; and the name agent (e.g., assistant treasurer).	and address of
	Name Treasurer	Tamara Beatty Peterson	.
		P.O. Box 1174	
ividi	ling Address	%Whitney Burns	
		Springfield VA 22151	
			P CODE
	e or Position easurer		
ı —			

FEC Form 1 (Re	evised 02/2009)		Page 4
Full Name of Designated Whitr Agent	ney W. Burns		
Mailing Address	P.O. Box 1174		
	Springfield	VA 221: STATE	51 ZIP CODE
Title or Position Assistant Treasurer		e number	
safety deposit boxes or Name of Bank, Deposit	tory, etc.		
safety deposit boxes or Name of Bank, Deposit	maintains funds.		
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc.		
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. nk of America		
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. nk of America	VA 232	
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. P.O. Box 27025		
safety deposit boxes or Name of Bank, Deposit Bar Mailing Address	maintains funds. tory, etc. P.O. Box 27025 Richmond CITY	VA 232	61
safety deposit boxes or Name of Bank, Deposit Bar Mailing Address	maintains funds. tory, etc. P.O. Box 27025 Richmond CITY	VA 232	61
Safety deposit boxes or Name of Bank, Deposit Mailing Address Name of Bank, Deposit	P.O. Box 27025 Richmond CITY CITY	VA 2321 STATE	61
Safety deposit boxes or Name of Bank, Deposit Mailing Address Name of Bank, Deposit	P.O. Box 27025 Richmond CITY CITY	VA 2321 STATE	61
safety deposit boxes or Name of Bank, Deposit	P.O. Box 27025 Richmond CITY CITY	VA 2321 STATE	61