PAGE 1/6

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Obama Victory Fund 2012 PO Box 8102 ADDRESS (number and street) (Check if address is changed) Chicago 60680 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS OVFfec@obamabiden.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.obamabiden.com (Check if address is changed) DATE 2013 C00494740 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Taryn Vogel Type or Print Name of Treasurer Taryn Vogel [Electronically Filed] 80 2013 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

F	EC For	m 1 (Revised 02/2009)	Page 2
		OMMITTEE Committee:	
(a)	uiuale	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	П	This committee is an authorized committee, and is NOT a principal campaign committee. (Com	plete the candidate
, ,		information below.)	olote the dandade
Name Candi			
Candi		Office	State
Party	Affiliation	on Sought: House Senate President	District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
		umittoo.	
	y Com	· · · ·	(Democratic,
(d)	Щ.	, , , , , , , , , , , , , , , , , , , ,	Republican, etc.) Party.
Polit	ical A	ction Committee (PAC):	
(e)	Ш	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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 se committee. (i.e., nonconnected committee)	gregated 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 tw	o or more political
		committees/organizations, at least one of which is an authorized committee of a federal candidate.	
(h)	Ш	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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	DNC Services Corp./Democratic National Committee FEC ID number C C000	010603
	2.	Obama For America C C004	131445
	3.	Democratic Executive Committee of Florida	005561
	4	Iowa Democratic Party FEC ID number C C000	35600

	FEC Form 1 (Revised 0	2/2009)	Page 3
Wr	ite or Type Committee Name		
C	bama Victory	Fund 2012	
6.	Name of Any Connected O	ganization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
	Mailing Address		
		CITY STATE	ZIP CODE
	Relationship: Connected	Organization	Leadership PAC Sponso
,	redutionship.	organization / minuted committee / Joint Landraising representative	Loddor Strip 1 710 Oponso
	Custodian of Records: Identi books and records.	ify by name, address (phone number optional) and position of the person in p	oossession of committee
	Taryn Voge	<mark>.</mark> 	
	Mailing Address	PO Box 8102	
	•		
)
	Title or Position	CITY STATE	ZIP CODE
	Custodian of Records		985 - 1700
i. 1	Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the sistant treasurer).	name and address of
	Full Name Taryn Voge of Treasurer		
ľ	Mailing Address	PO Box 8102	
		Chicago IL 60680	
	Title or Position	CITY STATE	ZIP CODE
7	THE OF POSITION		

. 20 . 0	m 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	5	2 0002
	Telephone number	
 Banks or Other safety deposit b Name of Bank, 	oxes or maintains funds. Depository, etc.	
safety deposit b	Depository, etc. Bank of America PO Box 27025	
safety deposit b Name of Bank,	Depository, etc. Bank of America PO Box 27025	
safety deposit b Name of Bank,	Depository, etc. Bank of America PO Box 27025	-7025 -1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
safety deposit b Name of Bank,	Depository, etc. Bank of America PO Box 27025	-7025 ZIP CODE
safety deposit b Name of Bank,	Depository, etc. Bank of America PO Box 27025 Richmond VA 23261 CITY STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America PO Box 27025 Richmond VA 23261 CITY STATE Depository, etc.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America PO Box 27025 Richmond VA 23261 CITY STATE Depository, etc.	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America PO Box 27025 Richmond VA 23261 CITY STATE Depository, etc.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America PO Box 27025 Richmond VA 23261 CITY STATE Depository, etc.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America PO Box 27025 Richmond VA 23261 CITY STATE Depository, etc.	

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant Pennsylvania Democratic Party C00167130 FEC ID number

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011) Page List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant Democratic Party of Virginia C00155952 FEC ID number