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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. Searchlight Lake Tahoe Victory Fund 700 13th Street, NW ADDRESS (number and street) Suite 600 (Check if address is changed) Washington 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PLGroup@perkinscoie.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2015 C00543793 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR 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. Chris Anderson Type or Print Name of Treasurer Chris Anderson [Electronically Filed] 05 20 2015 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

FEC	C Fo i	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE O a servicio de la constantina della co	
Candid	date	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. (Cominformation below.)	plete the candidate
Name of Candida			
Candida Party Af		Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida			
Party (Com	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politica	al A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 so committee. (i.e., nonconnected committee)	egregated 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 F	und	raising 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
(Com	mittees Participating in Joint Fundraiser	
	1.	Rennet For Colorado	458398
2	2.	People For Patty Murray FEC ID number C C00	257642
3	3.	Searchlight Leadership Fund FEC ID number C COO	327395
4	4.		

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Write or Type Committee Name		r	age y
	e Tahoe Victory Fund		
	rganization, Affiliated Committee, Joint Fundraising Re	presentative, or Leadership PA	AC Sponsor
NONE			
Mailing Address			
			-
	CITY	STATE ZIP C	ODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraisin	ng Representative Leadersh	ip PAC Sponsor
 Custodian of Records: Iden books and records. 	tify by name, address (phone number optional) and pos	ition of the person in possessic	on of committee
Chris Ande	erson		
Mailing Address	700 13th Street, NW		
Walling Address	Suite 600		
	Washington	DC 20005	
Title or Position	CITY	STATE ZIP C	ODE
Treasurer	Telephone nu	umber	-
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the ssistant treasurer).	ne committee; and the name an	d address of
Full Name Chris Ande	rson		ı
of Treasurer	700 13th Street, NW		
Mailing Address	Suite 600		
		1 DO 1 120005	
	Washington	DC 20005 STATE ZIP C	- DDE
Title or Position Treasurer	Telephone nu		_
<u> </u>			·

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		ZII CODE
	Telephone number	
safety deposit b	er Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds. Depository, etc.	
safety deposit b	Depository, etc. EagleBank 2001 K Street NW Suite 204	
safety deposit b Name of Bank,	Depository, etc. EagleBank 2001 K Street NW	D6
safety deposit b Name of Bank,	Depository, etc. EagleBank 2001 K Street NW Suite 204	D6 ZIP CODE
safety deposit by Name of Bank, Mailing Address	Depository, etc. EagleBank 2001 K Street NW Suite 204 Washington DC 2000	
safety deposit by Name of Bank, Mailing Address	Depository, etc. EagleBank 2001 K Street NW Suite 204 Washington CITY STATE	
safety deposit by Name of Bank, Mailing Address	Depository, etc. EagleBank 2001 K Street NW Suite 204 Washington CITY STATE	
safety deposit by Name of Bank, Mailing Address	Depository, etc. EagleBank	
safety deposit by Name of Bank, Mailing Address Name of Bank,	Depository, etc. EagleBank	
safety deposit by Name of Bank, Mailing Address Name of Bank,	Depository, etc. EagleBank	