

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

RECEIVED
FEC MAIL
OPERATIONS CENTER

2004 FEB 23 A 10 28

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Burr Senate Victory Committee

ADDRESS (number and street)

PO Box 75103

(Check if address is changed)

Washington

DC

20013

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

MM / DD / YYYY
02 / 18 / 2004

3. FEC IDENTIFICATION NUMBER

C

4. 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

Type or Print Name of Treasurer Melinda Anderson

Signature of Treasurer

Date

MM / DD / YYYY
02 / 18 / 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5457g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 08/2003)

5. TYPE OF COMMITTEE (Check One)

- (a) 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. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

B. Name of Any Connected Organization or Affiliated Committee

NATIONAL REPUBLICAN SENATORIAL COMMITTEE _____

Mailing Address _____

 WASHINGTON DC 20002
 CITY STATE ZIP CODE

Relationship JF Participant _____

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or Type Committee Name

Burr Senate Victory Committee

7. **Custodian of Records:** Identify by name, address, (phone number - optional), and position of the person in possession of Committee books and records.

Full Name Melinda Anderson

Mailing Address PO Box 75103

Washington DC 20013

CITY A STATE A ZIP CODE A

Telephone number _____

8. **Treasurer:** List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Melinda Anderson

Mailing Address PO Box 75103

Washington DC 20013

CITY A STATE A ZIP CODE A

Treasurer Telephone number _____

Full Name of Designated Agent Thomas Maxwell, III

Mailing Address PO Box 75103

Washington DC 20013

CITY A STATE A ZIP CODE A

Assistant Treasurer Telephone number _____

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or holds other funds.

Name of Bank, Depository, etc.

Wachovia Bank

Mailing Address

1753 Pinnacle Drive

McLeen

VA

22102

CITY Δ

STATE Δ

ZIP CODE Δ

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

[ADDITIONAL]

Name of Bank, Depository, etc.

Mailing Address

CITY Δ

STATE Δ

ZIP CODE Δ

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

NORTH CAROLINA REPUBLICAN EXECUTIVE COMMITTEE

Mailing Address

1505 Hillsborough Street

PO Box 12905

Raleigh

NC

27605

CITY Δ

STATE Δ

ZIP CODE Δ

Relationship

JF Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Designated Agent

[ADDITIONAL]

Full Name Douglas Robinson

Mailing Address PO Box 75103

Washington DC 20013

Title or Position Assistant Treasurer CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number _____

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

[ADDITIONAL]

Name of Bank, Depository, etc.

[Empty grid line]

Mailing Address

[Empty grid line]

[Empty grid line]

[Empty grid line]

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

RICHARD BURR COMMITTEE, THE

[Grid line]

[Grid line]

Mailing Address

Post Office Box 5028

[Grid line]

[Grid line]

Winston-Salem

NC

27113

[Grid line]

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

JF Participant

[Grid line]

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Designated Agent

{ ADDITIONAL }

Full Name

.....

Mailing Address

.....
.....
.....

Title or Position

CITY

STATE

ZIP CODE

.....

Telephone number

.....

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.

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