

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

OPERATIONS CENTER

2004 SEP -2 P 3 26

CHS0406174

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M6

BATTLEGROUND VICTORY FUND #4

ADDRESS (number and street)

430 SOUTH CAPITOL STREET, SE

(Check if address is changed)

WASHINGTON

DC

20003

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2028638174

2. DATE

08 27 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

ANDREW TOBIAS

Signature of Treasurer

[Handwritten Signature]

Date

9/1/04

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing the Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact: Federal Election Commission, Toll Free 800-424-9630, Local 202-894-1100

FEC FORM 1 (Revised 02/2003)

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.

6. Name of Any Connected Organization or Affiliated Committee

DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address 430 S. CAPITOL STREET S.E.

WASHINGTON DC 20003

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

BATTLEGROUND VICTORY FUND #4

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 BRAD MARSHALL

Mailing Address 430 SOUTH CAPITOL STREET, SE

WASHINGTON DC 20003

Title or Position CITY STATE ZIP CODE

ASSISTANT TREASURER Telephone number 202 863 8000

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 ANDREW TOBIAS

Mailing Address 430 SOUTH CAPITOL ST., SE

WASHINGTON DC 20003

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 202 863 8000

Full Name of Designated Agent BRAD MARSHALL

Mailing Address 430 SOUTH CAPITOL STREET, SE

WASHINGTON DC 20003

Title or Position CITY STATE ZIP CODE

ASSISTANT TREASURER Telephone number 202 863 8000

5. **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.

Name of Bank, Depository, etc.

BANK OF AMERICA, NA

Mailing Address

730 15TH STREET, NW

WASHINGTON

DC

20003

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 ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

MISSOURI DEMOCRATIC STATE COMMITTEE

Mailing Address

P.O. Box 719

Jefferson City

MO

65102

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

JF PARTICIPANT

Type of Connected Organization:

Corporation

Corporation with 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 _____

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 ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

WEST VIRGINIA STATE DEMOCRATIC EXECUTIVE COMMITTEE

Mailing Address

5 GREENBRIER STREET

CHARLESTON

WV

25311

CITY ▲

STATE ▲

ZIP CODE ▲

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 _____

Mailing Address _____

Title or Position ▼ 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.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Mailing Address

2 1/2 BEACON STREET

CONCORD

NH

03301

CITY ▲

STATE ▲

ZIP CODE ▲

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

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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 9-2-04
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Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	9-2-04 DATE PREPARED