

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

RECEIVED
APR 25 2002
FEDERAL ELECTION COMMISSION

02 APR 25 PM 1:42

Office use only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines

12FE4M5

Dale 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)

2. DATE

04 / 25 / 2002

3. FEC IDENTIFICATION NUMBER

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

Doug Robinson

Signature of Treasurer

Doug Robinson

Date

04 / 25 / 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5497g.

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 202-684-1100

FEC FORM 1
(Revised 1/2001)

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

NATIONAL REPUBLICAN SENATORIAL COMMITTEE _____

Mailing Address _____ PO Box 75103 _____

_____ WASHINGTON _____ DC _____ 20013 _____

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

Dole 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 D. Jan McBride

Mailing Address PO Box 75103

Washington DC 20013

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number _____

- a. **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 Doug Robinson

Mailing Address PO Box 75103

Washington DC 20013

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number _____

Full Name of Designated Agent D. Jan McBride

Mailing Address PO Box 75103

Washington DC 20013

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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 maintains funds.

Name of Bank, Depository, etc.

First Union National Bank

Mailing Address

1870 Chain Bridge Road

McLean

VA

22102

CITY ▲

STATE ▲

ZIP CODE ▲

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.

[**ADDITIONAL**]

Mailing Address		
CITY ▲	STATE ▲	ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[**ADDITIONAL**]

DOLE 2002 COMMITTEE

Mailing Address		
POST OFFICE BOX 2109		
SALISBURY	NC	28145
CITY ▲	STATE ▲	ZIP CODE ▲

Relationship **JF Participant**

Type of Connected Organization:

- | | | |
|--|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association | <input type="checkbox"/> Cooperative |

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 04-25-02
Date of Receipt

FAX (48-HOUR NOTICES) _____
Date of Receipt

INSIDE MAIL _____
Date of Receipt

RECEIVED FROM THE LEGISLATIVE RESOURCE CENTER _____
Date of Receipt

RECEIVED FROM THE FEDERAL ELECTION COMMISSION _____
Date of Receipt

FIRST CLASS MAIL _____
Postmarked

REGISTERED/CERTIFIED MAIL _____
Postmarked

NO POSTMARK **POSTMARK ILLEGIBLE**

OTHER (Specify): _____
 AIRBORNE EXPRESS
 EXPRESS MAIL
 FEDERAL EXPRESS
 UPS
Postmark and/or Date of Receipt

RD 04-25-02
Preparer Date Prepared