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STATEMENT OF

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17 JUN 16 PM 12: 03

ORGANIZATION FORM 1 Office Use Only Example: If typing, type NAME OF (Check if name 12FE4M5 over the lines. COMMITTEE (in full) is changed) isconsin Virginia Victory Fund ADDRESS (number and street) (Check if address is changed) ashington ZIP CODE CITY STATE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) ızamore@capcompliance.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE FEC IDENTIFICATION NUMBER AMENDED (A) OR NEW (N) IS THIS STATEMENT I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Judith Zamore Type or Print Name of Treasurer Signature of Treasurer 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. For further information contact: **FEC FORM 1** Office Federal Election Commission Use (Revised 02/2009) Toll Free 600-424-9530

Local 202-694-1100

TYPE OF COMMITTEE								
Cano	didate	Committee:						
(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 candinformation below.)							
Name Candi								
Candi Party	idate Affiliatio	Office State Sought: House Senate President District						
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name Candi								
Party Committee:								
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.						
Political Action Committee (PAC):								
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a						
•	لسسا	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 segregated fund or party committee. (i.e., nonconnected committee)						
		In addition, this committee is a Lobbyist/Registrant PAC.						
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
		In addition, this contributed is a ceadership PAC. (Identity Sponsor on time 6.)						
Joint	t Fund	raising Representative:						
(g)	\boxtimes	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
	Com	mittees Participating in Joint Fundraiser						
	1.	Tammy Baldwin for Senate FEC ID number C 00326801						
	2.	Kaine for Virginia FEC ID number C 00495358						

FEC ID number C

FEC ID number C

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FEC Form 1 (Revised 02/2009)

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FEC Form 1 (Revis	ed 02/2009)	Page 3
Write or Type Committee N		
Wisconsin Viro	ginia Victory Fund	
	ed Organization, Affiliated Committee, Joint Fundralsing Representative, or Le	adership PAC Sponsor
None	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
7. Custodian of Records: books and records.	Identify by name, address (phone number - optional) and position of the person	in possession of committee
Full Name Jud	ith Zamore	
Mailing Address	918 Penņsylvania Ave SE	
	Washington DC 2	0003
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
8. Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the committee; and to g., assistant treasurer).	he name and address of
Full Name of Treasurer Jud	ith Zamore	
Mailing Address	918 Penņsylvania Aγe SE	
	Washington DC 21	0003]-
Title or Position Treasurer	Telephone number	

Full Name of Designated Agent	_I Kriştin	Solander	1 1	1 1 1 1	1 1 1 1 1 1 1 1 1
Mailing Address		9,18, Pennsylvania Ave SE	1	1111	
maining / nooroo			1 1 1 1 1	1 1 1 1	
		Washington CITY		[DC] STATE	20003 -
Title or Position [Assistant]	reasurer		elephone numi	oer <u>l</u>	
Banks or Other safety deposit be Name of Bank,	oxes or main		h the committe	e deposits f	unds, holds accounts, rents
	[Amalg	amated Bank	1 1 1 1 1	1 1 1 1	1 1 1 1 1 1 1
Mailing Address		1825 K St NW	1 1 1 1 1		<u> </u>
			1 1 1 1 1	1111	111111111
		Washington		IDÇ J	[20006,]-[
		CITY		STATE	ZIP CODE
Name of Bank,	Depository, e	etc.			
		<u> </u>			<u> </u>
		1	<u> </u>	1 J L.L.	
Mailing Address					
Mailing Address			11111	1 1 1 1	
Mailing Address					

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Faxed or Hand Delivered

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HART SENATE DEFICE BUILDING SUITE 232

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

WASHINGTION, DC 20510-7115 PHONE(202) 224-0322

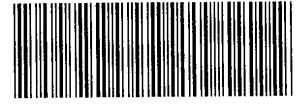
4/04/16

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED Oate of Recent
USPS FIRST CLASS MAIL Date of Receipt Postmark
USPS REGISTERED/CERTIFIED Postmark
USPS PRIORITY MAILPostmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL
USPS EXPRESS MAIL Postmark
OVERNIGHT DELIVERY SERVICE:
SHIPPING DATE NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS
UPS
DHL
AIRBORNE EXPRESS
RECEIVED FROM FEDERAL ELECTION COMMISSION Date of Receipt
POSTMARK ILLEGIBLE NO POSTMARK
FAXDate of Receipt
paré or vecerbr
OTHER Date of Receipt or Postmark
PREPARER DATE PREPARED 6



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