

FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

04 AUG 16 PM 2:06

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FB4M5

CRAP & OTHER VICTORY COMMITTEE

FEDERAL ELECTION COMMISSION  
PUBLIC AFFAIRS SECTION  
DIVISION

ADDRESS (number and street)

P.O. BOX 1948

(Check if address is changed)

BRIDGE

SD

23701

1948

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

sbachman@sableone.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

202-336-9923

2. DATE

07 30 2004

3. FEC IDENTIFICATION NUMBER ▶

C

4. IS THIS STATEMENT

X

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

SANDRA S. BACHMAN

Signature of Treasurer

Sandra S. Bachman

Date

08 09 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only				
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For further information contact:  
Federal Election Commission  
725 First Street, N.W.  
Washington, D.C. 20542-6044

FEC FORM 1  
(Revised 02/2003)

FEC Form 1 (Revised 02/2004)

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

GRADUATE VICTORY COMMITTEE

Mailing Address P.O. BOX 1948

BOISE ID 83701-1948

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship JOINT FUNDRAISING REPRESENTATIVE

Type of Connected Organization:

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

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Write or Type Committee Name

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 SANDRA S. BACHMAN

Mailing Address 4444 E AMITY ROAD

BOISE ID 83716-5629

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position TREASURER Telephone number 208-890-9247

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 SANDRA S. BACHMAN

Mailing Address 4444 E AMITY ROAD

BOISE ID 83716-5629

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position TREASURER Telephone number 208-890-9247

Full Name of Designated Agent \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position \_\_\_\_\_ Telephone number \_\_\_\_\_

FEC Form 1 (Revised 02/2006)

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

Name of Bank, Depository, etc.

WELLS FARGO BANK

Mailing Address

610 E BOISE AVE

BOISE

ID

83706

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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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