## FEC

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## STATEMENT OF ORGANIZATION

2010 MAY 26 AM 10: 11

FORM 1		·	ORGANIZA	ATION			
			(See instruction	ns)		Office use only	
1.	NAME OF COMMITTEE (in 1	full)	(Check if name is changed)	Example: If typying, typover the lines	oe 12FĘ4M5		
با	Portman Victor	ry Committee	2010				
<b>₽</b> DI	DRESS (number and s	ercect) 22	28 S. Washington S	treet	<u> </u>	<del></del>	
	·		uite 115				
	(Check if address is changed)	<u></u>	lexandria	<del></del>		22314	
				CITY	STATE	ZIP CODE	
СО	MMITTEE'S E-MAI	IL ADDRESS (PI	ease provide only one e	e-mail address)			
П	(Check if address	ko	davis@hdafec.com		<u> </u>		
Ц	is changed)	Ĺ					
СО	MMITTEE'S WEB	PAGE ADDRES	S (URL)				
П	(Check if address	1.					
Ц	is changed)						
2.	DATE M M M	' D D '	20,10, Y				
3.	FEC IDENTIFICA	TION NUMBER		<del>c  · · · · · · · · · · · · · · · · · · ·</del>			
4.	IS THIS STATEM	MENT X . N	NEW (N) OR	AMENDED (/	A)		
	tifu that I have examin	ned this Statement	and to the heet of my know	ledge and belief it is true, correc	et and complete		
ı ce	rtify that I have examin	ned this Statement	and to the best of my know	ledge and belief it is true, correc	a and complete		
Тур	e or Print Name of	Treasurer	Keith A. Davis	<u> </u>			
Sig	nature of Treasure	r Electronically	Filed by Jail	IA Davi	Date 0,5	25 7 2010	
NO	TE: Submission of fals	se, erroneous, or inc	complete information may s	subject the person signing this S	statement to the penalties	s of 2 U.S.C. §437g.	
_		ANY	CHANGE IN INFORMA	TION SHOULD BE REPOR	RTED WITHIN 10 DA	YS	
	Office Use Only			For further informa Federal Election Co Toll Free 800-424-9	mmission	FEC FORM 1 (Revised 02/2009)	

	FEC F	Form 1 (Revised 02/2009)	Page 2					
 5.	. TYPE OF COMMITTEE (Check One)							
	Candidate C	Candidate 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 information below.)	candidate					
	Name of Candidate							
	Candidate Party Affiliati	tion Sought: House Senate President	State					
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate		L_ ill!_					
	Party Comm							
	(d)	This committee is a (National, State (Dem	ocratic, blican,etc.) Party.					
	Political Act	ction Committee (PAC):						
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	organization is a:					
		Corporation Corporation w/o Capital Stock Labor Or	ganization					
		Membership Organization Trade Association Coopera	vivo.					
			iuvç					
	(f) 🗖	In addition, this committee is a Lobbyist/Registrant PAC.	find as and.					
	L	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	iund or party					
		In addition, this committee is a Lobbylst/Registrant PAC.						
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fundraising Representative:								
	(9) X	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political					
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political					
	Committees Participating in Joint Fundraiser							
		PORTMAN FOR SENATE COMMITTEE  1. FEC ID number  C C00458463						
		OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE  2. FEC ID number C00162339						
		3. NATIONAL REPUBLICAN SENATORIAL COMMITTEE number C C00027466						
		FEC ID number	<del>- • • • • • • • • • • • • • • • • • • •</del>					

CITYA STATEA ZIP CODE.  Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC 3  Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.  Full Name Keith A, Davis  Mailing Address 228 S. Washington Street  Suite 115  Alexandria VA 22314 -  Title or Position Y CITYA STATEA ZIP CODE  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 Keith A. Davis  Mailing Address 228 S. Washington Street  Suite 115  Alexandria VA 22314  Title or Position Y CITYA STATEA ZIP CODE  Treasurer Suite 115  Alexandria VA 22314  Title or Position Y CITYA STATEA ZIP CODE	FEC Form 1 (Revised 0	2/2009)		Page 3	
NONE  Mailing Address  CITYA  STATE A  ZIP CODE, Relationship: Connected Organization  Affiliated Committee  Joint Fundraising Representative, or Leadership PAC Sport  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC STATE A  ZIP CODE, Relationship: Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC StATE A  ZIP CODE, Relationship: Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC StATE A  ZIP CODE, Town State A  ZIP CODE  Title or Position V  CITY A  STATE A  ZIP CODE  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  Keith A. Davis  Leadership PAC Sport  Leadership PAC StATE A  ZIP CODE  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  Keith A. Davis  Leadership PAC STATE A  ZIP CODE  Treasurer  Leadership PAC STATE A  ZIP CODE  STATE A  ZIP CODE  Title or Position V  CITY A  STATE A  ZIP CODE  STATE A  ZIP CODE  Title or Position V  CITY A  STATE A  ZIP CODE  Town STATE A  ZIP CODE	• •				
Mailing Address  CITYA STATEA ZIP CODE.  Relationship: Connected Organization Affiliated Committee Joint Fundralsing Representative Leadership PAC :  Custodian of Records: Identify by name, address, (phone number — optional), and position of the person in possession of Committee books and records.  Full Name Kelth A, Davis  228 S. Washington Street  Suite 115  Alexandria VA 22314 —  Title or Position Y CITY A STATEA ZIP CODE Treasurer Telephone number 703 — 549 —  3. Treesurer: 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  Keith A. Davis  228 S. Washington Street  Suite 115  Alexandria VA 22314 —  Title or Position Y CITYA STATEA ZIP CODE	Portman Victory Comm	ttee 2010			
Mailing Address  CITY▲ STATE▲ ZIP CODE Affiliated Committee	Name of Any Connected O	ganization, Affiliated Committee, Joint Fundralsing Represe	entative, or Lea	ndership PAC Sponsor	
CITY▲ STATE A ZIP CODE, Relationship:  Connected Organization	NONE ; ; ; ; ; ;	: : !       <u>                              </u>		<u>. ! .                                 </u>	
CITYA STATEA ZIP CODE, Relationship: Connected Organization		<u> </u>	<u>i l i l :</u>	<u> </u>	
CITYA STATEA ZIP CODE A  Relationship:  Connected Organization	Mailing Address		<u>.                                     </u>	<u> </u>	
CITY▲ STATE A ZIP CODE , Relationship: Connected Organization			<u> </u>	<u> </u>	
Relationship:  Connected Organization					
Custodian of Records: Identify by name, address, (phone number — optional), and position of the person in possession of Committee books and records.  Full Name		CITYA	STATE A	ZIP CODE	
Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.  Full Name  Mailing Address  228 S. Washington Street  Suite 115  Alexandria  VA  22314  Title or Position V  Treasurer  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  Keith A. Davis  Mailing Address  228 S. Washington Street  Suite 115  Alexandria  VA  22314  Title or Position V  CITY A  STATE A  ZIP CODE  Treasurer  Suite 115  Alexandria  VA  22314  ZIP CODE	Relationship:		-	•	
Full Name  Mailing Address  228 S. Washington Street  Suite 115  Alexandria  VA  22314  Title or Position ▼  CITY A  STATE A  ZIP CODE  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  Mailing Address  Keith A. Davis   228 S. Washington Street  Suite 115  Alexandria  VA  22314  ZIP CODE  Title or Position ▼  CITY A  STATE A  ZIP CODE	Connected Organization	Affiliated Committee Joint Fundraising Rep	resentative	Leadership PAC Sponso	
Title or Position ▼ CITY A STATE A ZIP CODE  Treasurer Telephone number 703 - 549 -  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  Keith A. Davis  Mailing Address  228 S. Washington Street  Suite 115  Alexandria VA 22314 -  Title or Position ▼ CITY A STATE A ZIP CODE	Mailing Address	Walling Address			
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name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Mailing Address  228 S. Washington Street  Suite 115  Alexandria  VA  22314 −  Title or Position ▼  CITY ▲  STATE ▲  ZIP CODE	Treasure:	Telephone nun	nber <u>703</u>	- 549 - 7705	
of Treasurer  Mailing Address  228 S. Washington Street  Suite 115  Alexandria  VA  22314 −  Title or Position ▼  CITY ▲  STATE ▲  ZIP CODE			of the commit	tee; and the	
Suite 115  Alexandria VA 22314 —  Title or Position ♥ CITY ▲ STATE ▲ ZIP CODE	Maith.	A. Davis			
Alexandria VA 22314  Title or Position ♥ CITY ▲ STATE ▲ ZIP CODE	Mailing Address	228 S. Washington Street			
Title or Position ♥ CITY ▲ STATE ▲ ZIP CODE		Suite 115			
		Alexandria	<u></u>	22314 _	
Troceurar 700 E40	Title or Position ♥	CITY A	STATE	ZIP CODE A	
Treasurer Telephone number	Treasure	Telenhone nu	703	_ 549 _ 7705	

CITY 4

**STATE** 

ZIP CODE A

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FEC Form 1 (Revised 02/2009)

Lisa R. Lisker

Full Name of Designated

Mailing Address

Agent

Federal Election Commis ENVELOPE REPLACEMENT PAGE FOR IN The FEC added this page to the end of this filing to	COMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signatu	ure Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify): Nex	Shipping Date  \$\sum_{2}\sigma\rightarrow  Shipping Date
Received from House Records & Registration O	Date of Receipt ffice
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
SU	5/26/10
(3/2005)	DATE PREPARED