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July 24, 2009

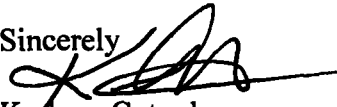
Federal Election Commission  
999 E. Street, NW  
Washington, DC 20463

Dear Federal Election Commission:

Enclosed please find the executed FEC FORM 1 "Statement of Organization" for YOLLY ROBERSON FOR CONGRESS and a copy of the previously filed FEC FORM 2 "Statement of Candidacy" for YOLLY ROBERSON FOR CONGRESS.

If you have any questions, please feel free to contact Kerlyne Cotard, treasurer, at 305 770-4347.

Sincerely

  
Kerlyne Cotard

29030131449

2009 JUL 27 PM 12:00

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

YOLLY ROBERSON FOR CONGRESS

ADDRESS (number and street)

900 NE 195th Street #408

(Check if address  
is changed)

MIAMI

FL

33179

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

VICTORY\_ZYRA@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

HTTP://www.victoryforcongress.com

COMMITTEE'S FAX NUMBER

305-770-4347

2. DATE

07 23 2009

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

KERLYNE COTARD

Signature of Treasurer

Date

07 23 2009

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.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 12/2007)

29030131450

5. TYPE OF COMMITTEE

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 candidate information below.)

Name of Candidate YOLLY ROBERSON

Candidate Party Affiliation DEM Office Sought:  House  Senate  President State FL District 17

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

Party Committee:

- (d)  This committee is a CT (National, State or subordinate) committee of the DEM (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:
  - Corporation  Corporation w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  Cooperative
- (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 Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  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.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<u>C</u>
2.	_____	FEC ID number	<u>C</u>
3.	_____	FEC ID number	<u>C</u>
4.	_____	FEC ID number	<u>C</u>
5.	_____	FEC ID number	<u>C</u>

29030131451

Write or Type Committee Name

YOLLY ROBERSON FOR CONGRESS

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

NONE

Mailing Address

900 NE 195th Street #408

MIAMI FL

FL 33179

CITY

STATE

ZIP CODE

Relationship:

Connected Organization  Affiliated Committee  Leadership PAC Sponsor  Joint Fundraising Representative

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

KERLYNE COTARD

Mailing Address

900 NE 195 Street #408

MIAMI

FL

33179

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

305-770-4347

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

KERLYNE COTARD

Mailing Address

900 NE 195 Street #408

MIAMI

FL

33179

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

305-770-4347

29030131452

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for 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.

BANK ATLANTIC

Mailing Address

163rd Street Mall 121

1495 NE 163 Street

MIAMI Beach FL 33162

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

29030131453

**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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked  
7/25/09

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

  
 PREPARER

7/29/09  
 DATE PREPARED

29030131454