

FEC FORM 1

STATEMENT OF ORGANIZATION

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FEC MAIL CENTER
12FE4M5

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

Delaney Victory Fund

PO Box 70835

ADDRESS (number and street)

(Check if address is changed)

Bethesda MD 20813

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

X (Check if address is changed) fec@campaignfinances.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) none

2. DATE 10 / 03 / 2012

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 Justin Schall

Signature of Treasurer [Handwritten Signature] Date 10 / 03 / 2012

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.

Table with 5 columns and 1 row for Office Use Only.

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

FEC FORM 1 (Revised 02/2009)

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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 _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

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:

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.)

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. Friends of John Delaney _____ FEC ID number **C** 00508416
2. Democratic State Central Committee of Maryland _____ FEC ID number **C** 00141812
3. _____ FEC ID number **C**
4. _____ FEC ID number **C**

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Write or Type Committee Name

Delaney Victory Fund

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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 Brett P Smiley

Mailing Address 1 Park Row, 5th Fl

Providence RI 02903

Title or Position CITY STATE ZIP CODE

Deputy Treasurer Telephone number 401-454-0990

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 Justin Schall

Mailing Address PO Box 70835

Bethesda MD 20813

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 301-215-6363

12030892508

Full Name of Designated Agent

Brett P Smiley

Mailing Address

1 Park Row, 5th Fl

Providence

CITY

RI

STATE

02903

ZIP CODE

Title or Position

Deputy Treasurer

Telephone number

401

454

0990

12030892509

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.

Wells Fargo

Mailing Address

1300 I St NW

Washington

CITY

DC

STATE

20005

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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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify): Next Business Day Delivery <input type="checkbox"/>	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER

10/4/12
 DATE PREPARED

12030892510