FEC

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Cobb Victory Fund PO Box 713 ADDRESS (number and street) (Check if address is changed) Canton 13617 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS holly@campaigncompliance.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2019 C00722256 FEC IDENTIFICATION NUMBER > 3. X 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. Giarraputo, Holly, , , Type or Print Name of Treasurer Giarraputo, Holly,,, [Electronically Filed] 10 08 2019 Signature of Treasurer Date 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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	COMMITTEE			
Candidat	e 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. (Con information below.)	nplete the candidate		
Name of Candidate				
Candidate Party Affiliat	Office Sought: House Senate President	State		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District		
Name of Candidate				
Party Cor				
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.		
Political A	Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 si	egregated fund or party		
(1)	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund 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 Fund	draising Representative:			
(g) x	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political		
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political		
Con	nmittees Participating in Joint Fundraiser			
1.	COMMITTEE TO ELECT TEDRA CORR	649061		
2.	NEW YORK STATE DEMOCRATIC COMMITTEE	143230		
3.	FEC ID number C			
4.				

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Write or Type Committee		<u> </u>
Cobb Victor	ry Fund	
	nected Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: C	onnected Organization Affiliated Committee Joint Fundraising Represen	tative Leadership PAC Sponso
Custodian of Records.	rds: Identify by name, address (phone number optional) and position of the	person in possession of committee
	iarraputo, Holly, , ,	
Full Name	3242 Cummins Way	
Mailing Address		
	Missoula	59802
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	202 498 7123
	name and address (phone number optional) of the treasurer of the committee to the committee (e.g., assistant treasurer).	e; and the name and address of
Full Name Gi of Treasurer	arraputo, Holly, , ,	
Mailing Address	3242 Cummins Way	
	Missoula	59802
Title or Position	CITY STATE	ZIP CODE 7122
	Telephone number	202 498 7123

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	J				
Full Name of Designated Agent					
Mailing Address					
	CODE				
Title or Position Telephone number Telephone number					
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.					
Amalgamated Bank					
Mailing Address 1825 K St., NW					
Washington DC 20006					
CITY STATE ZIF	P CODE				
Name of Bank, Depository, etc.					
Mailing Address					
CITY STATE ZIF	CODE				