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FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

	<u> </u>	·		Office use only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typying, typ over the lines	12FE4M5	
ENSIGN FOR SENATE			1 1 1 1 1 1 1	
	<u> </u>	1111111	111111	
ADDRESS (number and street)	PO BOX 370667			
(Check if address			111111	
is changed)	LAS YEGAS			89137
COMMITTEE'S E-MAIL ADDRES	ss	CITY	STATE ▲	ZIP CODE 🛦
llisker@hdafec.com			111111	
			111111	
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
<u> </u>				
				
COMMITTEE'S FAX NUMBER 7036840683				
2. DATE 0,5 / D	9 / Y 20,0 8 Y			
3. FEC IDENTIFICATION NUM	BER [C C00286476		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A	A)	
I certify that I have examined this Sta	tement and to the best of my kno	owledge and belief it is true, corr	rect and complete	
Type or Print Name of Treasurer	Lisa Lisker			
Signature of Treasurer Electro	Mae R Xe	J er	Date 5	· 32 · 350°8
NOTE: Submission of false, erroneou	us, or incomplete information ma	• • •		s of 2 U.S.C. S437g.
Office Use Only FE3AN042.PDF		For further informa Federal Election Co Toll Free 800-424-9 Local 202-694-1100	mmission 530	FEC FORM 1 (Revised 02/2003)

. TYPE OF COMMITT	∃E (Check One)	
(a) X This	committee is a principal campaign committee. (Complete the candidate	e information below.)
` '	committee is an authorized committee, and is NOT a principal campaig nation below.)	n committee. (Complete the candidate
Name of Candidate	JOHN E ENSIGN	
Candidate Party Affiliation	REP Office House X Senate	President State NV District 00
(c) This	ommittee supports/opposes only one candidate, and is NOT an author	ized committee.
Name of Candidate		
(d) This	(National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
(e) This	ommittee is a separate segregated fund	
(f) This comm	ommittee supports/opposes more than one Federal candidate, and is littee.	NOT a separate segregated fund or party
. Name of Any Conn	ected Organization or Affiliated Committee	
None		
11111		
Mailing Address		
	CITY▲	STATE ▲ ZIP CODE ▲
		ı
Relationship		
Relationship Type of Connected		
_		Labor Organization

(C) M M IJ

8.0202

Write	or	Туре	Committee	N	lame	
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ustodian of Recossession of Cossession		ify by name, address, (phone numb	er optional), and position of th	e person in
ull Name		ong and records.		- -
dii (Valiic	Lisa Lisk	er 		
tailing Address		228 S. Washington St.	, Ste. 115	
	-	Alexandria		22314 _
itle or Position ▼		CITY A	STATE A	ZIP CODE A
	reasurer		703 Telephone number	
				itee; and the
ull Name f Treasurer	Lisa Lisk	er		
lailing Address	-	228 S. Washington St.	, Ste. 115	
	-	Alexandria	VA	22314 _
itle or Position ¥		CITY ▲	STATE ▲	ZIP CODE A
7	reasurer		Telephone number	549 7705
ull Name of esignated gent	Keith Da	vis		
lailing Address	-	228 S. Washington St.	, Ste. 115	
		Alexandria	VA	22314 –
itle or Position ¥		CITY A	STATE A	ZIP CODE A
	Assistant Tr	easurer	Telephone number 703	549 7705
	reasurer: List ame and address Ill Name Treasurer ailing Address tle or Position Ill Name of esignated gent ailing Address	Treasurer reasurer: List the name and and address of any default Name Treasurer ailing Address Treasurer Itle or Position Treasurer Itle Mame of esignated gent ailing Address Lisa Lisk Keith David Market Name of Serial Market Name of	Treasurer: List the name and address (phone number options are and address of any designated agent (e.g., assistant treated all Name Treasurer Lisa Lisker ailing Address Alexandria Treasurer LISA Lisker CITY A Treasurer LISA Lisker Alexandria Alexandria LISA Lisker Alexandria Alexandria LISA Lisker Alexandria Alexandria Alexandria Alexandria	Treasurer Telephone number — 703 Telephone number — 703 Telephone number — optional) of the treasurer of the commitment and address of any designated agent (e.g., assistant treasurer). Ill Name Treasurer Lisa Lisker

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 of Nevada	_1
Mailing Address	7251 W. Lake Mead Bivd.	
	Suite 108	
	Las Vegas NV 89128 _	
	CITY A STATE A ZIP CODE A	
Name of Bank, De	epository, etc.	_
		_
Mailing Address		_
		_

W

Washington, DC 20501

232 Hart Senate Office Building

US Secretary of the Senate

United States Senate Post Office

INSPECTION

United States Senate Post Office

INSPECTION

From: Origin ID: LVLA (703)549-7705 Lisa Lisker Huckaby Davis Lisker 228 S. Washington St., Ste. 115

Alexandria, VA 22314

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