## 201705050200079622

FEC FORM 1

## STATEMENT OF ORGANIZATION

SPERMIARY OF THE SENATE -

17 MAR -3 PM 2:27

FORM 1		ORGAN		Office Hee Colo		
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example:If typing, type over the lines.	<sup>9</sup> 12FE4M5	Office Use Only	
Upper Mid	west \	Vomen Viçto	ry Fund	1 1 1 1 1 1		
<u>L </u>	<u> </u>	<del>                                      </del>	<u> </u>	<del>                                      </del>		
ADDRESS (number and street)  918 Pennsylvania Ave SE						
(Check if ac is changed)		Washington		DC	20003	
			CITY	STATE	ZIP CODE	
COMMITTEE'S E-MA  (Check if is change)	address	SS (Please provide only on Zamore @ ca	ne e-mail address) apcompliance, c	om		
COMMITTEE'S WEB	PAGE ADD	RESS (URL)				
	(Check if address is changed)					
2. DATE Ö	Be	2517				
3. FEC IDENTIFIC	ation nu	мвек С				
4. IS THIS STATEM	MENT 🗵	NEW (N) OR	AMENDED (A	N)		
I certify that I have e	xamined thi	s Statement and to the L	pest of my knowledge and beli	ief it is true, correct	and complete.	
Type or Print Name of	of Treasurer	Judith Zam	ore			
Signature of Treasure	d	gold/	rque	Date D	B' 6.3' 2007	
NOTE: Submission of f			ion may subject the person sign ATION SHOULD BE REPORTE		the penalties of 2 U.S,C. §437g.	
Office Use			For further informati Federal Election Come Toll Free 800-424-953	mission	FEC FORM 1 (Revised 02/2009)	

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	<u> </u>	9- +				
Write or Type Committee Na	ame					
<b>Upper Midwes</b>	t Women Victory Fund					
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership P	AC Sponsor				
Nonce						
[None]						
Mailing Address						
		<u> </u>				
	CITY STATE ZIP (	CODE				
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Representative Leadersh	hip PAC Sponsor				
		np · r io oponio				
7. Custodian of Records: I books and records.	Identify by name, address (phone number optional) and position of the person in possessi	on of committee				
1		ŧ				
Full Name Judi	ith Zamore					
Mailing Address	1918 Pennsylvania Ave SE					
		<u> </u>				
	Washington, 20003	لــــا-ل				
Title or Position	CITY STATE ZIP C	ODE				
Treasurer	Telephone number	]-[]				
B. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the name arg., assistant treasurer).	nd address of				
Full Name of Treasurer	ith Zamore	1				
Mailing Address	1918 Pennsylvania Ave SE					
	Washington DC 20003	J- <u>L.</u>				
Title or Position	CITY STATE ZIP C	ODE				
Treasurer	Telephone number	ا-لـــــا.				
1						

	Full Name of Designated Agent						
	Mailing Address		9,18 Pennsylvania Ave SE				
				11111		11111	1.
			[Waşhington , ,	CITY		J [DC] STATE	20003   -
	Title or Position  Assistant T	reasure	r <sub></sub>		Telephon	•	
9.	Banks or Other safety deposit bo Name of Bank, [	exes or main	ntains funds.	ner depositories	in which the co	mmittee deposits	funds, holds accounts, re
		[Amalo	jamated Bank				
	Mailing Address		1825 K St NV	٧		11111	
					11111	1111	
			[Washington]	1111	11.11	DÇ	20006,
			·	CITY		STATE	ZIP CODE
	Name of Bank, Depository, etc.						
			<u> </u>				<u> </u>
	Mailing Address					1 1 1 1 . 1	<u> </u>
						<u> </u>	<u> </u>
						ليا ل	<u> </u>
				CITY		STATE	ZIP CODE
-	<del></del>		<u></u>				· · · · · · · · · · · · · · · · · · ·

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## Faxed or Hand Delivered

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DANA K. MACEALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232

WASHINGTION, DC 20510-7116

## United States Senate

OFFICE OF THE SECRETARY

PHONE(202) 224-0322

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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