Image# 12971203633 PAGE 1 / 4

FEC FORM 1		STATE ORGA						Office	Jse On	ıly			
1. NAME OF COMMITTEE (ir	n full)	(Check if n is changed		xample:If typi ver the lines.	ng, type	12F	E4M5						
MCNERNE	EY VIC	TORY FU	ND							1 1			
		P.O. Box 690371											⅃
ADDRESS (number a	nd street)	F.O. Box 090371											_
X (Check if ac is changed)		Stockton				CA		95269		<u> </u>			
			CITY			STATE			ZIP	CODE	Ξ		
COMMITTEE'S E-MA	AIL ADDRESS	S (Please provide or doug@jerrymcneri	-	address)									
(Check if is change													
COMMITTEE'S WEB (Check if is change	address	RESS (URL) None											
2. DATE 04	4 30	2012]										
3. FEC IDENTIFIC	CATION NUM	ИBER	C C00507	7186									
4. IS THIS STATE	MENT	NEW (N)	OR	× AMEN	NDED (A)								
I certify that I have e	examined this	Statement and to	the best of m	y knowledge	and belief it	is true,	correct	and co	mplete				
Type or Print Name	of Treasurer	Diane Ravnik											
Signature of Treasure	<i>Diane Ra</i> er	vnik		[Electronic	cally Filed]	Date	0 <u>4</u>	/ D	30	/ Y	20°	12	Y
NOTE: Submission of		us, or incomplete info						the pena	alties o	of 2 U	.S.C.	§437	g.
													_

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)	
-----------------------	--	--	--	--	---	---------------------------------	--

FE	EC Fo	orm 1 (Revised 02/2009)	Page 2
		COMMITTEE	
	ildate	E Committee: This committee is a principal committee (Complete the condidate information below)	
(a)	H	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	<u>Ц</u>	This committee is an authorized committee, and is NOT a principal campaign committee. (Compleinformation below.)	ete the candidate
Name Candid			
Candid Party /		ion Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	/ Con	nmittee:	
(d)			emocratic, epublican, etc.) Party.
Politi	ical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	ected 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 segrecommittee. (i.e., nonconnected committee)	egated fund or party
		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 two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	MCNERNEY FOR CONGRESS FEC ID number C C0039	8644
	2.	DEMOCRATIC STATE CENTRAL COMMITTEE OF CA - FEDERAL	5668
	3.	FEC ID number	
	4.		

FEC Form 1 (Revise	d 02/2009)	Page 3
Write or Type Committee Na		r age c
	/ICTORY FUND	
	I Organization, Affiliated Committee, Joint Fundraising Representat	ive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Joint Fundraising Representation	entative Leadership PAC Sponsor
7. Custodian of Records: lo books and records.	lentify by name, address (phone number optional) and position of th	e person in possession of committee
Linda P Full Name	erry	
Mailing Address	P.O. Box 690371	
	Stockton	95269
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	
8. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the commit , assistant treasurer).	tee; and the name and address of
Full Name Diane R	avnik	
Mailing Address	P.O. Box 690371	
	Stockton	95269
Title or Position Treasurer	CITY STATE	ZIP CODE
	Telephone number	

FEC For	1 (Revised 02/2009)			Page 4
Full Name of Designated	Linda Perry			
Agent				
Mailing Address	P.O. Box 690371			
	Stockton		CA 9526	i9
		CITY	STATE	ZIP CODE
Title or Position Assistant Treas	irer	Telephon	ne number	
safety deposit b Name of Bank,	Depositories: List all banks or o xes or maintains funds. Depository, etc. Bank of America 503 W. Benjamin Ho		ommittee deposits funds, h	olds accounts, rents
Mailing Address	<u> </u>			
	Stockton		CA 9520	7
		CITY	STATE	ZIP CODE
Name of Bank,	Depository, etc.			
	1			
Mailing Address				
Mailing Address				
Mailing Address				