

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

SECRETARY OF THE SENATE

09 NOV 16 PM 2:01

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

AYOTTE GRAYSON VICTORY COMMITTEE

ADDRESS (number and street)

PO BOX 365

(Check if address is changed)

MCLEAN

VA

22101

CITY ▲

STATE ▲

ZIP CODE ▲

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

(Check if address is changed)

melodie@complianceconsultingva.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

N/A

2. DATE

MM / DD / YYYY
11 / 16 / 2009

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

NEW (N)

OR

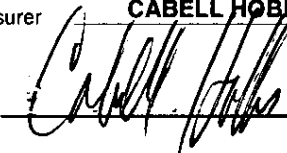
AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

CABELL HOBBS

Signature of Treasurer



Date

MM / DD / YYYY
11 / 16 / 2009

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
Use
Only

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

FEC FORM 1
(Revised 02/2009)

29020432644

5. TYPE OF COMMITTEE (Check One)

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

- (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
- (f) In addition, this committee is a Lobbyist/Registrant PAC.
 - 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 KELLY AYOTTE	FEC ID number	C C00464297
2.	FRIENDS OF TREY GRAYSON	FEC ID number	C C00461681
3.	NATIONAL REPUBLICAN SENATORIAL COMMITTEE	FEC ID number	C C00027466
4.		FEC ID number	C

29020432645

Write or Type Committee Name

AYOTTE GRAYSON VICTORY COMMITTEE

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

NONE

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

MELODIE JOHNSON

Mailing Address

PO BOX 365

MCLEAN

VA

22101

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

ASST. TREASURER

Telephone number

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

CABELL HOBBS

Mailing Address

PO BOX 365

MCLEAN

VA

22101

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

TREASURER

Telephone number

29020432645

Full Name of Designated Agent

MELODIE JOHNSON

Mailing Address

PO BOX 365

MCLEAN

VA

22101 -

Title or Position

CITY

STATE

ZIP CODE

ASST. TREASURER

Telephone number

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.

BB&T

Mailing Address

300 SOUTH WASHINGTON STREET

ALEXANDRIA

VA

22314 -

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

29020432647

NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-2116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED

11-16-09

Date of Receipt

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

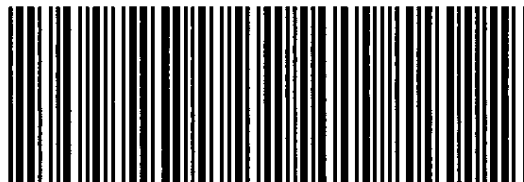
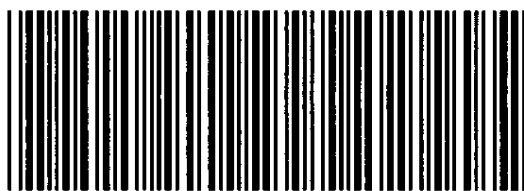
PREPARER

RD

DATE PREPARED

11-16-09

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