

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

06 FEB -2 AM 11:14

Office use only

1. NAME OF COMMITTEE (In full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Senate Democratic Victory 2008

ADDRESS (number and street)

120 Maryland Avenue NE

(Check if address is changed)

Washington

DC

20002

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

None

COMMITTEE'S WEB PAGE ADDRESS (URL)

None

COMMITTEE'S FAX NUMBER

2. DATE

MM 01

DD 23

YYYY 2006

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

John Patrick Anderson

Signature of Treasurer

J.P. Anderson

Date

MM 2

DD 23

YYYY 2006

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 8437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

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

FEC FORM 1 (Revised 02/2005)

25020080645

5. TYPE OF COMMITTEE (Check One)

- (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 _____

(d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) This committee is a separate segregated fund

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

KLOBUCHAR FOR MINNESOTA

Mailing Address 1430 CONCORDIA AVENUE
 PO BOX 4146
 SAINT PAUL MN 55104
 CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Joint Fundraising Participant _____

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

26020030646

Write or Type Committee Name

Senate Democratic Victory 2006

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 John Patrick Anderson

Mailing Address 120 Maryland Avenue NE

Washington DC 20002

Title or Position CITY STATE ZIP CODE

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 John Patrick Anderson

Mailing Address 120 Maryland Avenue NE

Washington DC 20002

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number

Full Name of Designated Agent Whitney W. Burns

Mailing Address P.O. Box 1174

Springfield VA 22151

Title or Position CITY STATE ZIP CODE

Assistant Treasurer Telephone number

26020080647

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.

Bank of America

Mailing Address

730 15th Street, NW

Washington

DC

20005

CITY ▲

STATE ▲

ZIP CODE ▲

26020080643

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.

[ADDITIONAL]

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

MCCASKILL FOR MISSOURI _____

Mailing Address PO BOX 6771 _____

ST LOUIS MO 63144 - _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Joint Fundraising Participant _____

Type of Connected Organization:

- | | | |
|--|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association | <input type="checkbox"/> Cooperative |

26020080649

Bank 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.

[ADDITIONAL]

Mailing Address

[Empty grid line]

[Empty grid line]

[Empty grid line]

[Empty grid line]

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

PEDERSON 2006

[Empty grid line]

[Empty grid line]

Mailing Address

PO BOX 34144

[Empty grid line]

PHOENIX

AZ

85087

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Joint Fundraising Participant

[Empty grid line]

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

26020080650

att Burns
74
VA 22151

CERTIFIED MAIL



7005 0390 0000 9649 8058

RETURN RECEIPT
REQUESTED

X-RAYED
BY THE SENATE
POST OFFICE

Senate Public Records Office
P.O. Box 5109
Alexandria, VA 22301



0000



22301

U.S. POSTAGE
MERRILL FIELD, VA
JAN 29, 06
WASHINGTON

\$4.88

00032756-58

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

USPS REGISTERED/CERTIFIED _____

Postmark

01-29-06

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	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DEHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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

02-02-06

26020080652

26020000653

