## 28039743688

## FEC FORM 1

## STATEMENT OF ORGANIZATION

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2008 JUN 10 AM 10: 37 Office use only

(See instructions)

1. NAME OF COMMITTEE (in full)	(Check if name is changed)	example: If typying over the lines	12FE4M5	
Majority Fund 2008	<u> </u>	<u> </u>	111111	
1			1 1 1 1 1 1 1	
ADDRESS (number and street)	228 S. Washington	St., Ste. 115		
(Check if address				
is changed)	Alexandria		<u>\</u> Y^_	22314
COMMITTEE'S E-MAIL ADDRESS	s	CITY▲	STATE _	ZIP CODE 🛦
Ilisker@hdafec.com	<del>                                      </del>		<del>                                      </del>	
COMMITTEE'S WEB PAGE ADDR	RESS (URL)			
COMMITTEE'S FAX NUMBER 7036840683	لبب			
2. DATE M M / D 0 9	2008			
3. FEC IDENTIFICATION NUMI	BER	С		
4. IS THIS STATEMENT	NEW (N) OR	AMENDE	ED (A)	
I certify that I have examined this State	ement and to the best of my l	knowledge and belief it is true	correct and complete	
Type or Print Name of Treasurer	Lisa Lisker	PD		
Signature of Treasurer Electron	ically Filed by Lisa Lis	ker	Date	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
NOTE: Submission of false, erroneous	•	may subject the person signing		_
Office Use Only FE3AN042.PDF		For further info Federal Election Toll Free 800-4 Local 202-694-	24-9530	FEC FORM 1 (Revised 12/2007)
LUMI1042.FUF				

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FEC Form 1 (Revised 12/2007)

Pa	a	e	2

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5.		MMITTEE (Check One)
	Candidate C	
	(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 State Senate President District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name of Candidate	
	Party Comm	Ittee:
	(d)	(National, State (This committee is a (Oemocratic, Republican, etc.) Party.
	Political Acti	on Committee (PAC):
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
	i constant	Corporation Corporation w/o Capital Stock Labor Organization
	(f)	I Monitorish Organization
	··	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 Leadership PAC. (Identify sponsor on line 6.)
	Joint Fundra	ising 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) X	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.
	Comr	nittees Participating in Joint Fundraiser
		1.   ILLINOIS REPUBLICAN PARTY 1.   FEC ID number   C   C00005926
		2. NEVADA REPUBLICAN STATE CENTRAL COMMITTEE 2. FEC ID number C C00082925
		OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE  3. FEC ID number C C00162339
		4. NORTH CAROLINA REPUBLICAN EXECUTIVE COMMITTEE  C C00038505
		5. WASHINGTON STATE REPUBLICAN PARTY FEC ID number C C00031088

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Write or Type Committee Name			
Majority Fund 2008		_	
6. Name of Any Connected Or	ganization, Affiliated Committee, Leadership P	AC Sponsor or Joint Fundrai	sing Representative
NONE	<del></del>		
1 1 1 1 1 1 1 1 1 1 1	1111111111111		111111
Mailing Address			
			<del></del>
		ا لیا لیں	
	CITY▲	STATE A	ZIP CODE
Relationship:			
Connected Organization	Affiliated Committee Leaders	ship PAC Sponsor Join	t Fundraising Representative
Mailing Address			
	Alexandria		22314 _
Title or Position ♥	CITY A	STATE &	ZIP CODE A
Treasurer		Telephone number 703	- 549 - 7705
	and address (phone number optional) of		tee; and the
Full Name of Treasurer Lisa L		•	
Mailing Address	228 S. Washington St,. Ste.	. 115	
	Alexandria	VA	22314
Title or Position ♥	CITY ▲	STATE &	ZIP CODE A
Treasure	<b>r</b> .	Tolophoro number 703	_ 549 _ 7705
		Telephone number	- ·

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(J)

436

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FEC Form 1 (Revised 12/2007)

**Assistant Treasurer** 

**Keith Davis** 

22314 -

549

ZIP CODE A

7705

tanks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents afety deposit boxes or maintains funds.																											
Name of Bank, De	pository	, etc.																									
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Name of Bank, De	pository	, etc.																							•		
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228 S. Washington St., Ste. 115

CITY A

VA

STATE A

Telephone number

703

Alexandria

Banks or Other Depositories safety deposit boxes or mainta		mittee deposits funds, ho	ds accounts, rents
Name of Bank, Depository, etc		Į.	ADDITIONAL ]
	<u></u>		
Mailing Address		1.1.1.1.1.1.1.	
	CITY 🛦	STATE 4	ZIP CODE A
Name of Any Connected Orga	anization, Affiliated Committee, Leadership PAC Spo	ensor or Joint Fundraisin	[ ADDITIONAL ] g Representative
Mailing Address			111111
		با ليا ل	
elationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Leadership PAC Spo	onsor Joint Fundr	aising Representative
Designated Agent			[ ADDITIONAL ]
Full Name	<u></u>		<del></del>
Mailing Address			
Title or Position ♥	CITY A	STATE	ZIP CODE &
	Telep	hone number	
Joint Fundraiser Participant			[ ADDITIONAL ]
MICHIGAN REPUBLIC	AN PARTY	EC ID number C C	00041160

Name of Bank, Deposit	maintains funds. ory, etc.			[ ADDITIONAL ]
1				- -
<u> </u>	<del>                                     </del>			
Mailing Address				
	لسيسيسا		ا ليا لــ	
		CITY 4	STATE 4	ZIP CODE A
Name of Any Connect	ed Organization, Affiliated Co	ommittee, Leadership PAC	Sponsor or Joint Fundrais	[ ADDITIONAL ing Representative
		<del>                                      </del>	<u> </u>	
		<del></del>		<u> </u>
Mailing Address				<u> </u>
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	L	<u> </u>	ا لیا لید	
		CITY	STATE A	ZIP CODE A
ationship: Connected Organization	Affiliated Commi	ittee Leadership PAC	Sponsor Joint Fund	draising Representative
Designated Agent				[ADDITIONAL]
Full Name			111111111	
i dii Hallie				
Mailing Address				
Mailing Address				
Mailing Address				
Mailing Address  Title or Position ♥		CITY A	STATE &	ZIP CODE &
			STATE &	ZIP CODE &

Banks or Other Depositories: safety deposit boxes or maintai		nmittee deposits funds, h	olds accounts, rents
Name of Bank, Depository, etc.			[ ADDITIONAL ]
<u> </u>			
Mailing Address			
	<u> </u>		
	<u> </u>		
	CITY 🛕	STATE 4	ZIP CODE 🛕
Name of Any Connected Orga	anization, Affiliated Committee, Leadership PAC Spo	onsor or Joint Fundrais	[ ADDITIONAL ] ing Representative
Mailing Address			
		ا ليا ل	
Relationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Leadership PAC Sp	onsor [] Joint Fund	draising Representative
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ♥	CITY A	STATE <b>▲</b>	ZIP CODE A
	Telen	hone number	
Joint Fundralser Participant			[ADDITIONAL]
CONNECTICUT REPU	BLICAN SCC	EC ID number	C00023838

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