Only

STATEMENT OF

PAGE 1/9

FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Friends of Dick Durbin Committee PO Box 1949 ADDRESS (number and street) (Check if address is changed) Springfield 62705 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS nissen@capcompliance.com (Check if address is changed) Optional Second E-Mail Address coatney@capcompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.dickdurbin.com (Check if address is changed) DATE 2020 C00148999 FEC IDENTIFICATION NUMBER > 3. X 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. Nissen, Melissa, , , Type or Print Name of Treasurer Nissen, Melissa, , , [Electronically Filed] 04 2020 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 02/2009)		Page 2
TYPE OF COMMITTEE		
Candidate Committee: (a) This committee is a pr	incipal campaign committee. (Complete the candidate information below.)	
	authorized committee, and is NOT a principal campaign committee. (Com	
information below.)		piete the candidate
Name of Candidate Durbin, Rich	nard, Joseph, ,	
Candidate Party Affiliation DEM	Office	State
Party Affiliation	Sought: House Senate President	District
(c) This committee suppor	rts/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committee:	(National, State	(Democratic,
(d) This committee is a		Republican, etc.) Party.
Political Action Committee (P	AC):	
(e) This committee is a se	eparate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a
Corporation	Corporation w/o Capital Stock	Labor Organization
Membership C	Organization Trade Association	Cooperative
In addit	tion, this committee is a Lobbyist/Registrant PAC.	
(f) This committee suppor committee. (i.e., noncor	rts/opposes more than one Federal candidate, and is NOT a separate sennected committee)	gregated 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 Fundraising Representa	tive:	
	contributions, pays fundraising expenses and disburses net proceeds for tw ns, at least one of which is an authorized committee of a federal candidate.	vo or more political
	contributions, pays fundraising expenses and disburses net proceeds for two, none of which is an authorized committee of a federal candidate.	o or more political
Committees Participating in	n Joint Fundraiser	
1. [FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4		

FEC Form 1 (Revised (02/2009)	Page 3
Write or Type Committee Name		
Friends of Dick	Durbin Committee	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative,	, or Leadership PAC Sponsor
Durbin Victory Fund		
Mailing Address	PO Box 1949	
	Springfield IL	62705
	CITY STATE	ZIP CODE
	d Organization Affiliated Committee Joint Fundraising Representation	
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number optional) and position of the p	erson in possession of committee
Nissen, Mo	elissa, , , , , , , , , , , , , , , , , , ,	
Mailing Address		
	W. 1: .	,20003
	Washington	20003
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	202 - 544 - 6960
5. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	; and the name and address of
Full Name Nissen, Me	əlissa, , ,	
Mailing Address	918 Pennsylvania Ave SE	
	Washington	20003
Title or Position Treasurer	CITY STATE Telephone number	ZIP CODE 202 - 544 - 6960

FEC For	m 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE Z	ZIP CODE
Title or Position		
	Telephone number	
		accounts, rents
safety deposit b	Depository, etc. Bank of Springfield 3400 Wabash Ave	accounts, rents
safety deposit b Name of Bank,	oxes or maintains funds. Depository, etc. Bank of Springfield ,3400 Wabash Ave	accounts, rents
safety deposit b Name of Bank,	Depository, etc. Bank of Springfield 3400 Wabash Ave Springfield IL 62711	accounts, rents
safety deposit b Name of Bank,	Depository, etc. Bank of Springfield 3400 Wabash Ave Springfield CITY STATE Z	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of Springfield	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of Springfield	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of Springfield	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

Page _5 **of** 9___

5(a)	or(h). Joint Fundraising	g Participant:		
· (9)	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	С
	4.			
6.	Name of Any Connected Illinois Democrats	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	918 Pennsylvania Ave SE		
		Washington	DC DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		•		
		1	elephone Number	
9.	Banks or Other Depositor	Te		s funds, holds accounts, rents
9.	Banks or Other Depositor safety deposit boxes or ma	Te: List all banks or other depositories in which		s funds, holds accounts, rents
9.		Te: List all banks or other depositories in which		s funds, holds accounts, rents
9.	safety deposit boxes or ma	Te: List all banks or other depositories in which		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	Te: List all banks or other depositories in which		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	Te: List all banks or other depositories in which		s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ____

h). Joint Fundraisi		FEC.II	D number	
1.			D number	C
2.			D number	C
3.				
4.		FEC II	D number	C
ame of Any Connected	Organization, Affiliated Committee, Jo	int Fundraising Re	presentative	e, or Leadership PAC Spon
Illinois Victory 20	20 			
Mailing Address	918 Pennsylvania Ave SE			
	Washington		DC	20003
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	X .loint Fundraisin	a Renresent:	ative Leadershin PAC S
	d Organization Affiliated Committee y by name, address (phone number – o	y Joint Fundraisin	g Representa	Leadership PAC S
			g Representa	Leadership PAC S
esignated Agent: Identif			g Representa	Leadership PAC S
esignated Agent: Identif			g Representa	Leadership PAC S
esignated Agent: Identif			g Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – o	otional)	g Representa	
esignated Agent: Identif	y by name, address (phone number – o	otional)	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – operations) CITY CITY ries: List all banks or other depositories	Telephone N	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – operations) CITY CITY ries: List all banks or other depositories	Telephone N	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – operations) CITY CITY ries: List all banks or other depositories	Telephone N	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – operations) CITY CITY ries: List all banks or other depositories	Telephone N	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – operations) CITY CITY ries: List all banks or other depositories	Telephone N	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\frac{7}{}$ of 9

FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundraising Participant: C FEC ID number C FEC ID number C FEC ID number C FEC ID number Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6. Illinois Senate Victory 2020 120 Maryland Ave NE Mailing Address 20002 Washington Relationship: ZIP CODE A CITY A STATE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number - optional) 8. Full Name Mailing Address ZIP CODE CITY A STATE A TITLE OR POSITION ▼ Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address

CITY A

STATE A

ZIP CODE A

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ____

	FEC ID n	umber	С
	FEC ID n	umber	С
	FEC ID r	umber	С
	FEC ID r	umber	С
Organization, Affiliated Committee, Joint	Fundraising Repre	sentative,	, or Leadership PAC Spons
ICTORY FUND			
918 Pennsylvania Ave SE			
Washington		DC	20003
CITY A	S	TATE A	ZIP CODE ▲
, 2)a , aaa (p	riai)		
	nai)		
CITY A		ATE A	ZIP CODE A
			ZIP CODE A
, L	918 Pennsylvania Ave SE Washington CITY	Organization, Affiliated Committee, Joint Fundraising Repre	918 Pennsylvania Ave SE Washington CITY ▲ STATE ▲ d Organization Affiliated Committee

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ____

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	С
4.			FEC ID number	С
	of Any Connected C	Organization, Affiliated Committee, Joint Functory Fund	ndraising Representativ	e, or Leadership PAC Sponsor
N	Mailing Address	918 Pennsylvania Ave SE		
		Washington	DC	20003
F	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sponsor
	nated Agent: Identify	by name, address (phone number – optional)		
Ма	ailing Address			
TI	ITLE OR POSITION •	CITY A	STATE ▲	ZIP CODE ▲
L			Telephone Number	
safety Name	or Other Depositorion deposit boxes or main of Bank, itory, etc.	es: List all banks or other depositories in which tains funds.	ch the committee deposi	ts funds, holds accounts, rents
safety Name Deposi	deposit boxes or mair of Bank,	es: List all banks or other depositories in which tains funds.	ch the committee deposi	ts funds, holds accounts, rents
safety Name Deposi	deposit boxes or mair of Bank, itory, etc.	es: List all banks or other depositories in which tains funds.	ch the committee deposi	ts funds, holds accounts, rents
safety Name Deposi	deposit boxes or mair of Bank, itory, etc.	es: List all banks or other depositories in which tains funds.	ch the committee deposi	ts funds, holds accounts, rents