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FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

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2008 JUL - 1 AM 9: 33

Office use only

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
ROMP II 2008	 			لبب
			<u> </u>	لىب
ADDRESS (number and street)	228 S. Washington S	L, Ste. 115		لسا
(Check if address				لىب
is changed)	Alexandria		YA 22314 -	لبب
COMMITTEE'S E-MAIL ADDRES		CITY	STATE _ ZIP CODE	^
Ilisker@hdafec.com				1
1			1 1 1 1 1 1 1 1 1 1 	
				444
COMMITTEE'S WEB PAGE ADD	RESS (URL)			
<u> </u>			1111111111	لىب
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COMMITTEE'S FAX NUMBER 7036840683 2. DATE	1 / Y Y Y Y Y			·
		the state of the s	- Ti	
3. FEC IDENTIFICATION NUM	BER			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined this Stat	ement and to the best of my know	wledge and belief it is true, correct a	and complete	
Type or Print Name of Treasurer	Lisa Lisker)		
Signature of Treasurer Electron	nically Filed by Lisa Liske	<u> </u>	Date 7 2	008
	-	subject the person signing this Stat	terment to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS	
Office Use Only FE3AN042.PDF		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		

	F	EC F	orm 1 (Revised 12/2007)					Page 2
5.	TYPE (OF CO	MMITTEE (Check One)					
	Candidate Committee:							
	(a)		This committee is a princ	cipal campaign o	committee. (Compl	ete the candidate in	formation below.)	
	(b)		This committee is an autinformation below.)	horized commit	tee, and is NOT a p	orincipal campaign c	committee. (Compl	ete the candidate
	Name Candid			<u> </u>			1 1 1 1 1	111111
	Candid Party A		on	Office Sought:	House	Senate	President	State
	(c)		This committee supports/	opposes only or	ne candidate, and i	is NOT an authorize	d committee.	District :
	Name Candid				<u> </u>	 	1 1 1 1	
	Party (Commi	ittee:					
	(d)		This committee is a		(National, State (or subordinate)	committee of the		(Democratic, Republican,etc.) Party.
	Politic	al Acti	on Committee (PAC):	···- <u>-</u>				
	(e)	П	This committee is a separ	ate segregated	fund. (Identify con	nected organization	on line 6.) Its conr	ected organization is a:
		أحجنا	Corporation		Corporation	w/o Capital Stock	L	abor Organization
			Membership Organiz	ation	Trade Asso	ociation		Cooperative
	(f)		This committee supports/ccommittee. (i.e., nonconne			andidate, and is NO	「a separate segre	gated fund or party
			In addition, this com	mittee is a Lead	dership PAC. (Iden	tify sponsor on line	6.)	
	Joint F	undra	ising Representative:					
	(g)	X	This committee collects cocommittees/organizations,					wo or more political
	(h)		This committee collects cocommittees/organizations,					wo or more political
		Comr	nittees Participating in Join	t Fundraiser				
			SHELLEY MOO!	RE CAPITO F	OR CONGRES	S FEC ID number	er C C0034	7849
			2. LINCOLN DIAZ-	BALART FOI	R CONGRESS	FEC ID numbe	C C0026	4028
			3. MARIO DIAZ-BA	LART FOR C	CONGRESS	FEC ID numbe	C C0037	6087
			4. PEOPLE FOR E	NGLISH	<u> </u>	FEC ID numbe	er C C0028	3606

FEC Form 1 (Revise	d 12/2007)		Page 3
Write or Type Committee Nar	ne		
ROMP II 2008			
. Name of Any Connected	Organization, Affiliated Committee, Leade	rship PAC Sponsor or Joint Fundra	ising Representative
NONE		 	
			<u> </u>
Mailing Address		<u> </u>	4 4 1 1 1 1 1 4
			
		ا ليا ليبين	
	CITYA	STATE 🛕	ZIP CODE
Relationship: Connected Organizat	tion Affiliated Committee	Leadership PAC Sponsor	nt Fundraising Representativ
possession of Committ	Identify by name, address, (phone num tee books and records. Lisker	ber optional), and position of th	ne person in
Full Name Mailing Address	228 S. Washington St	L, Ste. 115	
	Alexandria	VA	22314 _
Title or Position ♥	CITY A	STATE A	ZIP CODE A
Treasu		Telephone number	<u> </u>
name and address of a	ne and address (phone number option any designated agent (e.g., assistant tre		ittee; and the
of Treasurer LIS			
Mailing Address	228 S. Washington S	t., Ste. 115	
	Alexandria		22314 _
Title or Position ¥	CITY ▲	STATE A	ZIP CODE A
Treasu	rer	Telephone number 703	_ 549 _ 7705
		l eleptione number	

Designated Agent	Keith Davis					
Mailing Address	228 S. Washington St., Ste. 11	228 S. Washington St., Ste. 115				
	Alexandria		22314			
Title or Position ♥	CITY ▲	STATE A	ZIP CODE A			
Assis	tant Treasurer Tele	phone number				
Banks or Other Depos safety deposit boxes or		committee deposits funds,	holds accounts, rents			
Name of Bank, Deposit	tory, etc.					
E	3B&T		1.1.1.1.1.1.1			
Mailing Address	1909 K St., NW					
		 				
	Washington		20006 -			
	Washington CITY A	DC STATE △	20006 ZIP CODE _			
Name of Bank, Deposit	CITY 🗖	<u> </u>				
Name of Bank, Deposit	CITY 🗖	<u> </u>				
Name of Bank, Deposit	CITY 🗖	<u> </u>				
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Banks or Other Depositories: safety deposit boxes or maintain		ee deposits funds, ho	ds accounts, rents
Name of Bank, Depository, etc.]	ADDITIONAL]
ــــــا			
Mailing Address			
		!	
	CITY 🗖	STATE 4	ZIP CODE A
Name of Any Connected Orga	nization, Affiliated Committee, Leadership PAC Sponsor	r or Joint Fundraisir	[ADDITIONAL] ag Representative
Mailing Address		1 1 1 1 1 1	
Relationship:	CITY	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Leadership PAC Sponso	or Joint Fundr	aising Representative
Designated Agent		 	[ADDITIONAL]
Full Name	<u></u>	<u> </u>	1.
Mailing Address			·
Mailing Address			
Mailing Address			
Mailing Address Title or Position ♥	CITY A		ZIP CODE &
	CITY A Telephone		ZIP CODE &
		number	ZIP CODE &

Banks or Other Depositor safety deposit boxes or mai		•	•
Name of Bank, Depository,		[ADDITIONAL]
Mailing Address			
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Name of Any Connected C	Organization, Affiliated Committee, Leadership PAC Spons	or or Joint Fundraisi	[ADDITIONAL] ng Representative
<u> </u>			
Mailing Address			
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delationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Leadership PAC Spons	sor Joint Fund	raising Representative
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ♥	CITY A	STATE ▲	ZIP CODE &
	Tolonhor	ne number	
laint Eundraleas Bertisina	· · · · · · · · · · · · · · · · · · ·		[ADDITIONAL]
Joint Fundraiser Participa	RESS COMMITTEE	ID sumbos	00437913
	FEC	ID number CCC	recently 210 ;

Banks or Other Depositorie safety deposit boxes or maint		mittee deposits funds, ho	olds accounts, rents
Name of Bank, Depository, e		[ADDITIONAL]
Mailing Address			
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	CITY 🛦	STATE 4	ZIP CODE 🛕
Name of Any Connected Or	rganization, Affiliated Committee, Leadership PAC Spo	nsor or Joint Fundraisi	[ADDITIONAL]
<u> </u>			
<u> </u>			
Mailing Address			
		ا ليا لـ	
elationship:	CITY	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Leadership PAC Spo	onsor Joint Fund	raising Representative
Designated Agent			[ADDITIONAL]
Full Name	1 1 1 1 1 1 1 1 1 1		
Mailing Address			
Title or Position ♥	CITY A	STATE &	ZIP CODE &
		hone number	
Joint Fundraiser Participan			[ADDITIONAL]
STIVERS FOR CONG	GRESS	EC ID number C	C00441352
	<u> </u>		

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