Image# 13941592740				09/18/2013 14 : 19
FEC FORM 1	STATEMEN ORGANIZ		c	PAGE 1 / 4
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
COMMITTEE (in full)	× is changed)	over the lines.		
Franken Senate	/ictory 2014			
ADDRESS (number and street)	PO Box 583144			
(Check if address	1			
is changed)	Minneapolis		MN 55	458
			STATE ▲	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address	mburgess@alfranken.c	om		
is changed)	Optional Second E-Mail Add			
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
2. DATE 09 / 18				
3. FEC IDENTIFICATION NU		00519884		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it	is true, correct an	d complete.
	Thomas Borman			
Type or Print Name of Treasure				
Signature of Treasurer	as Borman	[Electronically Filed]	Date 09	/ D D / Y Y Y Y 18 2013
NOTE: Submission of false, errone		may subject the person signing to N SHOULD BE REPORTED W		e penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEC F	orm 1 (Revised 02/2009) Page 2		
TYPE OF (COMMITTEE		
Candidat	e 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 Affilia	tion Office Sought: House Senate President District		
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate			
Party Co	mmittee:		
(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		
	Corporation Corporation w/o Capital Stock Labor Organization		
	Membership Organization Trade Association Cooperative		
	In addition, this committee is a Lobbyist/Registrant PAC.		
(f)	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 Fun	draising Representative:		
^(g) X	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.		
Con	nmittees Participating in Joint Fundraiser		
1.	Minnesota DFL FEC ID number C C00025254		
2.	Al Franken for Senate 2014 FEC ID number C C00480384		
3.	FEC ID number		
4.	FEC ID number		

FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

Franken Senate Victory 2014

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

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee	loint Fundraising Representativ	ve Leadership PAC Sponsor
 Custodian of Records: Ident books and records. 	ify by name, address (phone number opt	ional) and position of the per	son in possession of committee
Shelli Hess	elroth		
Full Name	PO Box 583144		
	Minneapolis	MN	55458
Title or Position	CITY	STATE	ZIP CODE
Assistant Treasurer		Telephone number	3 - 559 - 7737

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	Thomas H Borman
Mailing Address	PO Box 583144
	Minneapolis
	CITY STATE ZIP CODE
Title or Position	Telephone number

Full Name of Designated Agent		
Mailing Address	PO Box 583144	
	Minneapolis	
	CITY STATE ZIP CODE	
Title or Position	rer Telephone number763 559 7737	

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.

Breme	r Bank	
Mailing Address	2400 Bremer Tower	
	Saint Paul	55101
	CITY	STATE ZIP CODE
Name of Bank, Depository,	etc.	
Mailing Address		
	CITY	STATE ZIP CODE