FEC	
<b>FORM</b>	•

## STATEMENT OF



PAGE 1 / 4 -

FEC FORM 1		ORGAN	IZATIO	N		RECEIV
						Pilite Use Only
NAME OF COMMITTEE (in		(Check if nam is changed)		nple:If typing, type the lines.	12FE4M5	EEC MAIL CENTER
Risch Victo	ry Cor	nmittee				
	1 1 1 1	1 1 1 1 1 1 1		1 1 1 1 1 1 1	<u> </u>	
ADDRESS (aumhor o	nd street\	228 S. Washington Stre	eet			
ADDRESS (number a		#115				
is changed	<b>d)</b>	, Alexandria			VA , , , , , , , , , , , , , , , , , ,	2314
		CITY A			STATE A	ZIP CODE ▲
COMMITTEE'S E-MA	AIL ADDRE	SS				
(Check if a		kdavis@hdafec.co	om			1
is changed	d)	Cational Second 5 M		<u> </u>	<del></del>	<del>                                     </del>
		Optional Second E-Ma	all Address	1 1 1 1 1 1	<u>i l l l l l</u>	1 1 1 1 1 1 1 1
COMMITTEE'S WEB		UHESS (UHL)				
is changed			1 1 1 1			
2. DATE 07 09 2013						
3. FEC IDENTIFICATION NUMBER ▶						
4. IS THIS STATE	MENT X	NEW (N)	PR Programme	AMENDED (A)		
I certify that I have	examined th	nis Statement and to the	best of my l	nowledge and belief it	is true, correct ar	nd complete.
Type or Print Name	of Treasure	r <u>Keith A. Day</u>	15	7		
Signature of Treasure	er 🚽	Ket II.	Man		Date 07	/ DDD / 2013
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	T			For further information of		FEC FORM 1
Use Only				Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	ion	(Revised 06/2012)

F	EC For	m 1 (Revised 02/2009)	Page 2
		OMMITTEE .	- · · · · · · · · · · · · · · · · · · ·
Can		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. (Compleinformation below.)	te the candidate
Name Cand			
Cand Party	lidate Affiliatio	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	ty Con	mittee:	
(d)	in in		emocratic, publican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	cted organization is a
		Corporation Corporation w/o Capital Stock	abor Organization
			Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
<b>/</b> 5\	h e en	This committee supports/opposes more than one Federal candidate, and is NOT a separate segr	egated fund or narty
(f)		committee. (i.e., nonconnected committee)	egated fulld of party
		In addition, thie committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	JIM RISCH FOR U & SENATE COMMITTEE FEC ID number C C0044	
	2.	SAVE ADVICTION FAC	
	3.	NATIONAL REPUBLICAN SENATORIAL COMMITTEE FEC ID number C C0002	in Per sadio no dinamenta mada na di maji na anguni naguni naji namagani ma 7466 . Albertalik na naka na mana iliname
	4.		diametrica de la fina di mandiament

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FEC Form 1 (Revise	d 02/2009)		Page 3
Write or Type Committee Na	me		
Risch Victory	Committee		
6. Name of Any Connected	1 Organization, Affiliated Committee, Jo	oint Fundraising Representation	ve, or Leadership PAC Sponsor
NONE			<u> </u>
Mailing Address			
-			
			1
	CITY	STATE	ZIP CODE
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	eted Organization Affiliated Committee	999-1-14	2540
<ol><li>Custodian of Records: lo books and records.</li></ol>	dentify by name, address (phone number	optional) and position of the	e person in possession of committee
Keith A	. Davis		
Full Name	228 C. Washington Street		
Mailing Address	228 S. Washington Street		
	#115 		
	Alexandria	VA	22314
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	703 - 549 - 7705
Treasurer: List the name any designated agent (e.g.)	and address (phone number optional) (	of the treasurer of the committ	ee; and the name and address of
Full Name Keith A. of Treasurer	Davis		
Mailing Address	228 S. Washington Street	<u> </u>	
	#115 		
	Alexandria	VA	[22314
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	703 - 549 - 7705

FEC Forn	n 1 (Revised 0	2/2009)			Page 4
,					
Full Name of Designated Agent	Lisa R. Lisker			1 1 1 1	
Mailing Address	ا ا	228 S. Washington Street	<u>                                     </u>	<u> </u>	1 1 1 1 1 1 1 1
Ū	[*	#115 	! ! ! ! ! ! !	1 1 1 1	
	Ľ	Alexandria		ĽÅ.	22314
Title or Position		CITY	:	STATE	ZIP CODE
Assistant Treas			Telephone numb	per	3 - 549 - 7705
safety deposit bo Name of Bank, (	Depository, etc.				
	. 1		1 1 1 1 1 1	1111	
	Ľ	Washington		DC	20006
		CITY		STATE	ZIP CODE
Name of Bank, I	Depository, etc.				
				<u> </u>	
Mailing Address	L				
	L		<u> </u>		
	1		1	1 , 1	1
	-			N	

## Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

The FEC added this page to the end of this filling	to indicate now it was received.
Hand Delivered	Date of Receipt
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USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Ne	ext Business Day Delivery
Received from House Records & Registration (	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Jan ()	7/8/13
PREPARER	DATE PREPARED

(3/2005)