## 11020010822

FEC FORM 1

## STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

(See instructions)

II JAN 14 AM 9: 13

1.	NAME OF COMMITTEE (in full)		(Check if name is changed)	Example: In over the lin	f typying, type nes	12FE4M5	
L	Florida-Missouri Victor	y <sub>ı</sub> Fund	11111	1111	<del>                                     </del>	<u></u>	
لـا		111		<u> </u>	<u> </u>	1.1.1.1.1.1	
ΑD	DRESS (number and street)	<b>426</b>	C St NE		11111		
П	(Check if address			1111			
is changed)  Washington  DC  20002							20002 -
				CITY		STATE	ZIP CODE 📥
СО	MMITTEE'S E-MAIL ADDRES	SS (Pleas	se provide only one	e-mail address)			
П	(Check if address	jud	∕.zamore@gmai	l.com		<del>]</del>	
	is changed)					1-1-1-1-1-1-1	
СО	MMITTEE'S WEB PAGE ADD	RESS (	JRL)				
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Ц	is changed)		1 1 1 1 1 1	1 1 1 1 1	1 1 1 1		
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2. DATE O1 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
3.	FEC IDENTIFICATION NUM	BER		C		]	
4.	IS THIS STATEMENT	NE	W (N) OR		MENDED (A)	··· <del>·</del>	
٦,	TO ANO OTATEMENT		TT (III)	<b>ப</b> '	WILLIADED (V)		
l ce	rtify that I have examined this Sta	tement ar	d to the best of my kn	owledge and belie	f it is true, correct a	and complete	`
			·				
Тур	oe or Print Name of Treasurer		Judith Zamore	0			
Sig	nature of Treasurer Electro	nically F	Public I lea by Judith Za	umore)	ne	Date 0,1	
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							
	· · · · · · · · · · · · · · · · · · ·	ANY CH	ANGE IN INFORMA	ATION SHOULD	OC REPURIED	WITHIN IN DAYS	
	Office Use Only			Feder	orther information al Election Commis ree 800-424-9530		FEC FORM 1 (Revised 02/2009)

5. TYPE OF COMMITTEE (Check One)								
Candidate Committee:								
	(a)		This committee is a principal campaign committee. (Complete	the candidate inform	ation below.)			
	(b)		This committee is an authorized committee, and is NOT a princinformation below.)	cipal campaign comr	nittee. (Complete the candidate			
	Name Cand			<u>                                     </u>				
	Cand Party	idate Affiliati	on Office House	Senate	State President District			
	(c)		This committee supports/opposes only one candidate, and is No	OT an authorized co	mmittee.			
_	Name Cand			1 1 1 1 1 1				
	Party	Comm						
	(d)		This committee is a (National, State (or subordinate) cor	mmittee 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 connec					ine 6.) Its connected organization is a:			
		ابا	Corporation Corporation w/o	Capital Stock	Labor Organization			
				•				
			Membership Organization Trade Associat	ion	Cooperative			
			In addition, this committee is a Lobbyist/Registrant P	AC.				
	<b>(f)</b>		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 s	ponsor on line 6.)				
	Joint F	Fundra	ising Representative:					
	(g)	X	This committee collects contributions, pays fundraising expenses committees/organizations, at least one of which is an authorized	s and disburses net p committee of a fede	proceeds for two or more political ral candidate.			
	(h)		This committee collects contributions, pays fundraising expenses committees/organizations, none of which is an authorized comm					
		Com	mittees Participating in Joint Fundraiser					
			1. BILL NELSON FOR U S SENATE	FEC ID number	C C00344051			
			2. MCCASKILL FOR MISSOURI 2012	FEC ID number	C C00431304			
	-		3.	FEC ID number	С			
			4	FEC ID number	C			

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Write or Type Committee Nan	ie e		
Florida-Missouri Vict	ory Fund		
. Name of Any Connected	Organization, Affiliated Committee, Joint Fundral	sing Representative, or Leade	ership PAC Sponsor
NONE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	<u>                                      </u>		
Mailing Address			
		ا ليا ليب	
	CITY▲	STATE 🛕	ZIP CODE
Relationship:  Connected Organizat	ion Affiliated Committee Joint Fu	undraising Representative	Leadership PAC Sponso
possession of Committ  Full Name  Judi	th Zamore	optional), and position of the	
possession of Committ	ee books and records.		
possession of Committ  Full Name  Judi	ee books and records. th Zamore		
possession of Committ  Full Name  Judi	ee books and records.  th Zamore  426 C St NE  Washington  CITY A		
possession of Committed  Full Name  Mailing Address  Title or Position   Treasurer: List the name and address of a full Name	ee books and records.  th Zamore  426 C St NE  Washington  CITY A	DC STATE A . Telephone number 202	20002
possession of Committed Full Name  Mailing Address  Title or Position  Treasurer: List the name and address of a Full Name	washington  CITY A  rer  ne and address (phone number optional) of tany designated agent (e.g., assistant treasurer)	DC STATE A . Telephone number 202	20002
possession of Committed Full Name  Mailing Address  Title or Position ▼  Treasurer: List the name and address of a Full Name of Treasurer  Jud	washington  CITY A  rer  ne and address (phone number optional) of tany designated agent (e.g., assistant treasurer)  ith Zamore	DC STATE A . Telephone number 202	20002 ZIP CODE & - 544 - 6960
possession of Committed Full Name  Mailing Address  Title or Position  Treasurer: List the name and address of a  Full Name of Treasurer  Jud	Washington  CITY A  Ter  The and address (phone number optional) of the any designated agent (e.g., assistant treasurer) with Zamore  426 C St NE	STATE A . Telephone number	20002

CITY A

STATE 4

ZIP CODE A

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Full Name of

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7116 PHONE: (202) 224-0322

## United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:	. ·
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UPS	🗆
DHL	
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Date of Receipt	
OTHER Date of Receipt or Po	ostmark
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PREPARER K	DATE PREPARED 01-14-11



