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FEC FORM 1

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STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1.	NAME OF COMMITTEE (in full)	4 -	(Check if name is changed)	Example: If typying over the lines	12FE4M5	the same of the same of		
با	Virginia Freshmen	Victory Fun	nd	<u> </u>				
ш	11111			<u> </u>				
ADE	DRESS (number and street)	134	1 G St, NW					
***!	(Check if address	Suit	Suite 740					
_]	is changed)		shington	.1111111	pc	20005		
				CITY	STATE ▲	ZIP CODE		
CO	MMITTEE'S E-MAIL AD	DRESS (Pleas	e provide only one	e-mail address)				
7	(Check if address is changed)	jani	ca@pcmsllc.con	n 				
,,,,, [†]	is clianged)	<u></u> _						
COM	MMITTEE'S WEB PAG	E ADDRESS (U	JRL)					
	(Check if address	Non	ie	<u> </u>	<u> </u>			
	is changed)							
2 . 3 .	DATE 08 /	311	2009	C;				
		grame)		number 3. Mar. 1 1	a andrews			
4.	IS THIS STATEMENT	X NE	W (N) OR	, AMENDI	ED (A)			
I cer	tify that I have examined t	his Statement an	d to the best of my kno	owledge and belief it is true	e, correct and complete			
Тур	e or Print Name of Trea	surer	Janica Kyriacop	·· <i>A</i> .·····				
Sigr	nature of Treasurer E	lectronically Fi	led by Janica Ky	MANACY vriacopoulos	Date D.	F 31 2009		
NOT	E: Submission of false, er	•	•		ng this Statement to the penal	•		
	Office Use Only					FEC FORM 1 (Revised 02/2009)		

FEC ID number

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C00438788

;C 1

This committee is a principal campaign committee. (Complete the candidate information below.)

This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate

Page 2

FEC Form 1 (Revised 02/2009)

information below.)

Committees Participating in Joint Fundraiser

1.

2.

3.

CONNOLLY FOR CONGRESS

PERRIELLO FOR CONGRESS

FRIENDS OF GLENN NYE

TYPE OF COMMITTEE (Check One)

Candidate Committee:

(a)

(b)

Name of Candidate

FEC Form 1 (Revised Write or Type Committee Name			Page 3				
Virginia Freshmen Vic							
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundrai	sing Representative, or Lead	ership PAC Sponsor				
NONE L	<u> </u>	<u> </u>	<u> </u>				
<u> </u>	<u> </u>	<u> </u>	<u> </u>				
Mailing Address		<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
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	CITY▲	STATE A	ZIP CODE				
Relationship: Connected Organization	on E Affiliated Committee Joint Fr	undraising Representative	Leadership PAC Sponsor				
Full Name L	a Kyriacopoulos 1341 G St, NW Suite 740						
	Washington	DC	20005 _				
Title or Position ♥ Treasure	CITY A	STATE A	ZIP CODE .}				
name and address of a	Ionica Kyriaconoulos						
Mailing Address	1341 G St, NW		· · · · · · · · · · · · · · · · · · ·				
-	Suite 740						
	Washington	DC	20005 _				
Title or Position ♥	CITY A	STATE A	ZIP CODE A				
Treasure	er	Telephone number					
	Telephone number = =						

FEC Form 1 (Revis	sed 02/2009)		Page 4			
Full Name of Designated Agent	Janica Kyriacopoulos					
Mailing Address	1341 G St, NW					
	Suite 740					
	Washington	DC	20005 -			
Title or Position ♥	CITY A	STATE A	ZIP CODE A			
Treasu	rer To	elephone number				
	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.					
Banks or Other Deposi safety deposit boxes or r Name of Bank, Deposito	itories: List all banks or other depositories in which the maintains funds. bry, etc.					
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USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirm	ation™ Label
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Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
En .	8/31/9
PREPARER (2/2005)	DATE PREPARED
(3/2005)	