**FEC** 

## **STATEMENT OF**

FORM 1		ORGANIZA	ATIO	N						
i Oilini i		(See instruction	ons)				Offic	e use only		
NAME OF COMMITTEE (i	n full)	(Check if name is changed)		mple: If typying the lines	, type	12FE4	-M5			
REVERSE TI	HE VOTE VICT	ORY COMMITTEE								لــــا
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ADDRESS (number ar	nd street)	264 N. Lumpkin St #	#202 							لــــا
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X is changed)		Athens				GA	L	30601		
			CITY			STATE		ZIP CO	DE 📥	
COMMITTEE'S E-M	IAIL ADDRESS (P	lease provide only one e-	-mail addr	ess)						
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2. DATE <b>M</b>	M / D D D 0 7	2009								
3. FEC IDENTIFIC	CATION NUMBER		C coo	470674		1				
	V	L		<del></del>	-	1				
4. IS THIS STATE	EMENT X	NEW (N) OR		AMENDE	ED (A)					
I certify that I have exa	mined this Statemer	nt and to the best of my kno	owledge ar	nd belief it is true	e, correct an	d complete				
Type or Print Name	of Treasurer _	Paul Kilgore								
Signature of Treasur	er Electronicall	y Filed by <b>Paul Kilg</b> o	ore			Date	<b>0</b> 1 /	<b>11</b>	Y Y Z C	) 1 0
NOTE: Submission of	false, erroneous, or	incomplete information ma	ay subject t	he person signir	ng this State	ement to the	penalties o	f 2 U.S.C. §4	l37g.	
	ANY	CHANGE IN INFORMA	ATION SH	OULD BE REF	PORTED W	VITHIN 10	DAYS			
Office Use Only				For further int Federal Election Toll Free 800-4	on Commiss		ı	FEC FO (Revised 02		

	FEC	Form 1 (Revised 02/2009)	Page <b>2</b>
5.	TYPE OF C	OMMITTEE (Check One) Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information	ion below.)
	(b)	This committee is an authorized committee, and is NOT a principal campaign commit information below.)	ttee. (Complete the candidate
	Name of Candidate		
	Candidate Party Affiliat	ion Office House Senate	State President District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized com-	mittee.
	Name of Candidate		
	Party Comr		
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Political Ac	tion Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line	e 6.) Its connected organization is a:
		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 sep committee. (i.e., nonconnected committee)	parate segregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint Fundra	aising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, at least one of which is an authorized committee of a federal	
	(h) X	This committee collects contributions, pays fundraising expenses and disburses net pr committees/organizations, none of which is an authorized committee of a federal candidate.	
	Con	nmittees Participating in Joint Fundraiser  AR-01 CONGRESSIONAL VICTORY COMMITTEE	
		1. FEC ID number	C C00470377
		2. AR-02 CONGRESSIONAL VICTORY COMMITTEE  FEC ID number	C C00470385
		3. AZ-08 CONGRESSIONAL VICTORY COMMITTEE FEC ID number	C C00470401
		. CO-03 CONGRESSIONAL VICTORY COMMITTEE C ID number	C C00470427

	FEC Form 1 (Revised 02	(2009)		Page 3
W	rite or Type Committee Name			
	REVERSE THE VOTE VI	CTORY COMMITTEE		
6.	Name of Any Connected Org	anization, Affiliated Committee, Joi	nt Fundraising Representative,	or Leadership PAC Sponsor
	NONE			
	NONE			
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	Mailing Address			
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		CITY	STATE	ZIP CODE A
	Relationship:	Affiliate of Occupatible of	7	
	Connected Organization	Affiliated Committee	Joint Fundraising Representa	tive Leadership PAC Sponsor
	Full Name			
	Title or Position ♥	CITY A	STAT Telephone number	ZIP CODE 14
8.		and address (phone number op designated agent (e.g., assistant		e committee; and the
	Full Name of Treasurer Paul Ki	lgore		
	Mailing Address	264 N. Lumpkin S	t #202	
		Athens	GA	30601 _
	Title or Position ♥	CITY A	STAT	EA ZIP CODE A
	TREASUR	ER	Telephone number	706 534 7780

FEC Form 1 (Revised	d 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY A	STATE A	ZIP CODE A
	Tele	phone number	
Banks or Other Depositor     safety deposit boxes or main	ries: List all banks or other depositories in which the ontains funds.	committee deposits funds, ho	lds accounts, rents
Name of Bank, Depository,	etc.		
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Mailing Address	PO Bos 4418		
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	Atlanta	GA	30302   _
	CITY 🗖	STATE <b>⊿</b>	ZIP CODE 🛕
Name of Bank, Depository,	etc.		
Mailing Address			

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Name of Any Connected Org	ganization, Affiliated Committee, Joint Fundraising Rep	resentative, or Leader	[ ADDITIONAL ] ship PAC Sponsor
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Relationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraising Rep	presentative Lead	dership PAC Sponsor
Designated Agent			[ ADDITIONAL ]
Full Name			
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Title or Position ▼	CITY A	STATE. <u></u> ▲	ZIP CODE A
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Title or Position ▼	CITY A	STATE <b>∡</b>	ZIP CODE A
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Joint Fundraiser Participant			[ ADDITIONAL ]
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Designated Agent			[ ADDITIONAL ]
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