FEC FORM 1

## STATEMENT OF ORGANIZATION

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FORM 1		UKGAN	11ZAII	JIN		12 050 50 LU 2: 55
1 01(11)			<del></del>		<u> </u>	ENG MACHINE CENTER
1. NAME OF COMMITTEE (in	full)	(Check if nar is changed)		mple:If typing, type r the lines.	12FE4M5	
Toomey P	rosper	ity Fund			1111	
					1 1 1 1	
ADDRESS (number a	nd street)	228 S. Washington S	t., Ste. 115			
(Check if ac is changed)		Alexandria			VA L	22314
			CITY	1	STATE	ZIP CODE
COMMITTEE'S E-MA  (Check if is change	address	S (Please provide only llisker@hdafec.o. kdavis@hdafe	com	idress)		
COMMITTEE'S WEB	PAGE ADD	RESS (URL)				
(Check if is change						
2. DATE 12	(1)	2012_				
3. FEC IDENTIFIC	CATION NU	IMBER	C			
4. IS THIS STATE	MENT 🗵	NEW (N)	OR [	AMENDED (A)		
I certify that I have e	examined thi	is Statement and to th	e best of my	knowledge and belief it	is true, correct a	and complete.
Type or Print Name	of Treasurer	Lisa Lisker				
Signature of Treasure	Lisa Lisa er	ker Su K	M		Date Z	7 3072
NOTE: Submission of		•	=	bject the person signing the DULD BE REPORTED WI		the penalties of 2 U.S.C. §437g.
Office Use Only				For further information co Federal Election Commissio Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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		PE OF COMMITTEE					
		te 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.)					
	ame of andidate	<u> </u>	<u> </u>				
_	andidate arty Affiliati	on Office Sought: House Senate President	State				
(c)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District				
	ame of						
Ca	andidate		<u> </u>				
P	arty Con		)				
(d)			Democratic, epublican, etc.) Party.				
Po	olitical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected 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)			regated fund or narty				
(1)	L	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 Lebbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Jo	int Func	Iraising Representative:					
(g)	X	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	or more political				
	lendi.	committees/organizations, none of which is an authorized committee of a federal candidate.					
	Com	mittees Participating in Joint Fundraiser					
	1.	FRIENDS OF PAT TOOMEY FEC ID number C C0046	31046				
	2.	PA PROSPERITY FUND PAC	3890				
	3.						
	J,						
	4.						

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Рапе	3

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Write or Type Committee Name	3					
Toomey Prosperity Fund						
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor						
NONE						
Mailing Address						
	CITY STATE	ZIP CODE				
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor				
Relationship.	Jorganization Parimated Committee 1 John Fundralsing Representative 1 Lea	dership FAC Sponsor				
Contadian of Decards Identification	neife, by name address (above number analysis) and negition of the name in name	assist of committee				
books and records.	ntify by name, address (phone number optional) and position of the person in pos	session of committee				
Lisa Liske	r					
Full Name						
Mailing Address						
	Alexandria VA 22314	لــــا-لـــ				
Title or Position	CITY STATE	ZIP CODE				
_						
Treasurer	Telephone number 703 -	549				
<ol> <li>Treasurer: List the name an any designated agent (e.g., a</li> </ol>	d address (phone number optional) of the treasurer of the committee; and the nar assistant treasurer).	me and address of				
Full Name Lisa Liske	r					
of Treasurer						
Mailing Address	228 S. Washington St., Ste. 115					
	Alexandria VA 22314					
Title on D. W.	CITY STATE	ZIP CODE				
Title or Position Treasurer	Telephone number	549  -  ,7705				
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Full Name of Designated	Keith Davis	
Agent		
Mailing Address	228 S. Washington St., Ste. 115	
	Alexandria VA 2231	4
	CITY STATE	ZIP CODE
Title or Position Assistant Trea		549 - 7705
Name of Bank,	, Depository, etc.	1
Mailing Address	1909 K St., NW	
,,, <u>,,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Washington DC 2000	6
	CITY STATE	ZIP CODE
Name of Bank,	, Depository, etc.	
Mailing Address	s [	
	CITY STATE	ZIP CODE

## **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. **Date of Receipt** Hand Delivered **Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): FEDEX 12/21/12 Next Business Day Delivery **Date of Receipt** Received-from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify): 12/26/12 DATE PREPARED