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FEC

STATEMENT OF

ORGANIZATION FORM 1 (See instructions) Office use only NAME OF (Check if name Example: If typying, type 12FE4M5 COMMITTEE (in full) is changed) over the lines McNerney Victory Fund 2010 6250 Village Parkway 2nd Floor ADDRESS (number and street) (Check if address is changed) CITY _ STATE _ ZIP CODE _ COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) info@jerrymcnerney.org (Check if address is changed) **COMMITTEE'S WEB PAGE ADDRESS (URL)** None (Check if address is changed) DATE C **FEC IDENTIFICATION NUMBER** IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete **Diane Ravnik** Type or Print Name of Treasurer Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signifig this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only			For further information contact: Federal Election Commission Toll Free 800-424-9530
Cilly	L	l	Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

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FEC Form 1 (Revised 02/2009)

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5.	TYPE	OF CO	MMITTEE (Check One)							
	Candi	date Co	ommittee:							
	(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.)							
	Name Candi									
	Candid Party	date Affiliatio	Office State Senate President District							
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.							
	Name Candid	-								
	Party	Commi	ittee:							
	(d)		This committee is a (National, State (Democratic, Republican, etc.) Party.							
	Politic	cal Acti	Ion Committee (PAC):							
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:							
			Corporation Corporation w/o Capital Stock Labor Organization							
			Membership Organization Trade Association Cooperative							
			Membership Organization Trade Association Cooperative							
	(f)	(-1	In addition, this committee is a Lobbyist/Registrant PAC.							
	• • •		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 sponsor on line 6.)							
	Joint F	undrai	sing Representative:							
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.							
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.							
		Comn	nittees Participating in Joint Fundraiser							
			1. MCNERNEY FOR CONGRESS 1. FEC ID number C C00398644							
			DEMOCRATIC STATE CENTRAL COMMITTEE OF CA - FEDERAL C C00105668							
			3.							
			4 FEC ID number C							

FEC Form 1 (Revised (2/2009)		Page3				
Write or Type Committee Name							
McNerney Victory Fund	1 2010						
Name of Any Connected O	ganization, Affiliated Committee, Joint Fundraising Repres	entative, or	Leadership PAC Sponsor				
NONE	<u> </u>	1.1.1.					
<u> </u>	<u> </u>						
Mailing Address							
		<u> </u>					
		ليا					
	CITY▲	STATE A	ZIP CODE				
Relationship: Connected Organization	Affiliated Committee Joint Fundraising Re	presentative	Leadership PAC Sponsor				
possession of Committee Full Name Mailing Address		<u> </u>					
	Dublin	CA	94568				
Title or Position ♥ Assistant	CITY A Treasurer Telephone nu	STATE	ZIP CODE 1				
name and address of an	and address (phone number – optional) of the treasure designated agent (e.g., assistant treasurer).	r of the cor	nmittee; and the				
Mailing Address	6250 Village Parkway 2nd Floor						
	Dublin	_CA	94568				
Title or Position ♥	CITY A	STATE A	ZIP CODE A				
Treasure	.						
	Telephone nu	ımber					

CITY A

STATE 4

ZIP CODE A

6250 Village Parkway 2nd Floor

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FEC Form 1 (Revised 02/2009)

Linda Perry

Full Name of Designated

Mailing Address

Agent

(3/2005)

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™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **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): 8/3/10 DATE PREPARED