

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATE

03 SEP -5 PM 1:50

Office use only

FD

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Lisa Murkowski Victory Committee

ADDRESS (number and street)

PO Box 75103

(Check if address is changed)

Washington

DC

20013

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

09 / 05 / 2003

3. FEC IDENTIFICATION NUMBER

C

4. 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.

Type or Print Name of Treasurer

Douglas W. Robinson

Signature of Treasurer

Douglas W. Robinson

Date

09 / 05 / 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

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, Local 202-694-1100

FEC FORM 1 (Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 of Candidate _____

Candidate Party Affiliation Office Sought House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) This committee is a separate segregated fund

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

LISA MURKOWSKI - U S SENATE _____

Mailing Address _____ PO BOX 100847 _____

ANCHORAGE AK 99510 - _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship IF Participant _____

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

Write or Type Committee Name

Lisa Murkowski Victory Committee

7. **Custodian of Records:** Identify by name, address, (phone number – optional), and position of the person in possession of Committee books and records.

Full Name **Douglas W. Robinson**

Mailing Address **PO Box 75103**

Washington **DC** **20013**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number _____ - _____ - _____

8. **Treasurer:** List the name and address (phone number – optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Douglas W. Robinson**

Mailing Address **PO Box 75103**

Washington **DC** **20013**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer

Telephone number _____ - _____ - _____

Full Name of Designated Agent **Thomas F. Maxwell, III**

Mailing Address **PO Box 75103**

Washington **DC** **20013**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer

Telephone number _____ - _____ - _____

9. **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.

Wachovia Bank

Mailing Address

1670 Chain Bridge Road

McLean

VA

22102

CITY ▲

STATE ▲

ZIP CODE ▲

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.

[ADDITIONAL]

Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Mailing Address

425 SECOND STREET NE

WASHINGTON

DC

20002

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

JF Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Designated Agent

[**ADDITIONAL**]

Full Name

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number - -

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART BUILDING
SUITE 222
WASHINGTON, DC 20510-7118
PH: 202-724-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 9/5/03
Date of Receipt

REGISTERED/CERTIFIED MAIL
Postmarked

RECEIVED FROM THE FEDERAL ELECTION
COMMISSION
Date of Receipt

OTHER (Specify): _____
 PRIORITY MAIL
 EXPRESS MAIL
 FEDERAL EXPRESS
 UPS
 AIRBORNE EXPRESS
Postmark and/or Date of Receipt

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FAX (48-HOUR NOTICES)
 FAX (FEC FORM #10)
 FAX (CAMPAIGN REPORT)
Date of Receipt

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RECEIVED FROM THE LEGISLATIVE RESOURCE
CENTER
Date of Receipt

PG 9/5/03
Preparer Date Prepared

23020351989

