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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Big Tent Republicans PAC 1621 Central Ave ADDRESS (number and street) (Check if address is changed) cheyenne 82001 WY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS antonrr@gmail.com (Check if address is changed) Optional Second E-Mail Address kerstin316@comcast.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00683854 FEC IDENTIFICATION NUMBER > 3. X 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. Schulz, Kerstin, , , Type or Print Name of Treasurer Schulz, Kerstin, , , [Electronically Filed] 07 2019 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

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	orm 1 (Revised 02/2009)  COMMITTEE	Page <b>2</b>
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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 Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee N		. age 🗸
Big Tent Rep	ublicans PAC	
<u>.</u>	ed Organization, Affiliated Committee, Joint Fundraising Representative, or	r Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
	ected Organization Affiliated Committee Joint Fundraising Representative	
books and records.	Identify by name, address (phone number optional) and position of the personal	son in possession of committee
Schul:	z, Kerstin, , ,	
Mailing Address	316 4th Street NE	
	Osseo	55369
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; a .g., assistant treasurer).	nd the name and address of
Full Name Schulz of Treasurer	z, Kerstin, , ,	
Mailing Address	316 4th Street NE	
	Osseo	55369
Title or Position	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated Agent	Lazzaro, Anton, , ,	
Mailing Address	465 Nicollet Mall	
	#801	
	Minneapolis MN 55401	ZIP CODE
Title or Position		211 0002
	Telephone number	
	er Depositories: List all banks or other depositories in which the committee deposits funds, ho poxes or maintains funds.	
safety deposit l	Depository, etc.  BMO Harris Bank  50 South 6th Street	
safety deposit l Name of Bank,	Depository, etc.  BMO Harris Bank  150 South 6th Street	
safety deposit l Name of Bank,	Depository, etc.  BMO Harris Bank  50 South 6th Street	
safety deposit l Name of Bank,	Depository, etc.  BMO Harris Bank  50 South 6th Street  #200	ZIP CODE
safety deposit I Name of Bank, Mailing Addres	Depository, etc.  BMO Harris Bank  50 South 6th Street  #200  Minneapolis  MN 55402	
safety deposit I Name of Bank, Mailing Addres	Depository, etc.  BMO Harris Bank  50 South 6th Street  #200  Minneapolis  MN 55402	
safety deposit I Name of Bank, Mailing Addres	Depository, etc.  BMO Harris Bank  50 South 6th Street  #200  Minneapolis  CITY  STATE  Depository, etc.	
safety deposit I Name of Bank, Mailing Address	Depository, etc.  BMO Harris Bank  50 South 6th Street  #200  Minneapolis  CITY  STATE  Depository, etc.	
safety deposit I Name of Bank, Mailing Address	Depository, etc.  BMO Harris Bank  50 South 6th Street  #200  Minneapolis  CITY  STATE  Depository, etc.	