

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Building Effective Responsible Government PAC (BERG PAC)

ADDRESS (number and street)

PO Box 6530

☒ (Check if address is changed)

Fargo

CITY ▲

ND

STATE ▲

58109

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒ (Check if address is changed)

curtisccci@aol.com

Optional Second E-Mail Address

bergpac@broghamerllc.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

M M / D D / Y Y Y Y Y Y
12 / 16 / 2018

3. FEC IDENTIFICATION NUMBER ►

C C00505693

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 Handegard, Russell, Wallace, ,

Signature of Treasurer Handegard, Russell, Wallace, ,

[Electronically Filed]









Date

M M / D D / Y Y Y Y Y Y
12 / 16 / 2018

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

1.  FEC ID number **C** 
2.  FEC ID number **C** 
3.  FEC ID number **C** 
4.  FEC ID number **C** 

Write or Type Committee Name

Building Effective Responsible Government PAC (BERG PAC)**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Rick Berg

Mailing Address

PO Box 6530

Fargo

CITY

ND

STATE

58109

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☒ Leadership PAC Sponsor**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

Handegard, Russell, Wallace, ,

Mailing Address

PO Box 6530

Fargo

CITY

ND

STATE

58109

ZIP CODE

Title or Position

Treasurer

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

Handegard, Russell, Wallace, ,

Mailing Address

PO Box 6530

Fargo

CITY

ND

STATE

58109

ZIP CODE

Title or Position
Treasurer

Telephone number

Full Name of
Designated
Agent

Handegard, Russell, Wallace, ,

Mailing Address

PO Box 6530

Fargo

CITY

ND

STATE

58109

ZIP CODE

Title or Position

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.

Bell Bank

Mailing Address

PO Box 10877

Fargo

CITY

ND

STATE

58106

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE