

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2012 FEB 29 PM 12:54 FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

ERIC BROSTEN FOR CONGRESS

ADDRESS (number and street)

520 Logan APT 310

(Check if address is changed)

Helena MT 59601

Helena

MT

59601

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

ericbrosten@hotmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 02nd / 24th / 2012

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT N 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 Eric Brosten

Signature of Treasurer

Date 02 / 24 / 2012

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 Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

12030751061

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Two rows of empty grid boxes for text entry.

Mailing Address

Three rows of empty grid boxes for mailing address, including a row for city, state, and zip code.

CITY

STATE

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

One row of empty grid boxes for full name.

Mailing Address

Three rows of empty grid boxes for mailing address, including a row for city, state, and zip code.

Title or Position

CITY

STATE

ZIP CODE

One row of empty grid boxes for title or position.

Telephone number

One row of empty grid boxes for 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

One row of empty grid boxes for full name of treasurer.

Mailing Address

Three rows of empty grid boxes for mailing address, including a row for city, state, and zip code.

CITY

STATE

ZIP CODE

Title or Position

One row of empty grid boxes for title or position.

Telephone number

One row of empty grid boxes for telephone number.

12030751063

Full Name of Designated Agent

Eric Brosten

Mailing Address

520 Logan APT 310

Helena MT 59601

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

406-996-1394

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.

AMERICAN FEDERAL

Mailing Address

28 Neill Avenue

Helena MT 59601

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12030751064

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.

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No Postmark


Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

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PREPARER
(3/2005)

2/29/12
DATE PREPARED

12030751065