

FEC FORM 1

STATEMENT OF ORGANIZATION

14 JUN -4 PM 3:28

Office Use Only

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

Sullivan for US Senate

ADDRESS (number and street) 3705 Arctic Blvd #447 (Check if address is changed) Anchorage AK 99503-5774 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Check if address is changed) krowell@sullivan2014.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) www.sullivan2014.com

2. DATE 05 23 2014

3. FEC IDENTIFICATION NUMBER C C00551093

4. IS THIS STATEMENT NEW (N) OR X 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 Campbell

Signature of Treasurer Eric Campbell Date 06 02 2014

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.

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5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate Dan Sullivan

Candidate Party Affiliation REP Office Sought: House Senate President State AK District 00

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

Name of Candidate _____

Party Committee:

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

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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) 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 Fundraising 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.

Committees Participating in Joint Fundraiser

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

1140204110099

Write or Type Committee Name

Sullivan for US Senate

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

Friends for an American Majority

Mailing Address 228 S. Washington Street, Suite 11

Alexandria

VA

22314-5404

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee X 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 Eric Campbell

Mailing Address 3705 Arctic Blvd

#447

Anchorage AK 99503-5774

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 907-306-8525

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 Eric Campbell

Mailing Address 3705 Arctic Blvd

#447

Anchorage AK 99503-5774

Title or Position Treasurer CITY STATE ZIP CODE

Treasurer Telephone number 907-306-8525

14020410972

Full Name of Designated Agent: Kathlene Rowell

Mailing Address: 13630 E GRASSLAND CIR

Palmer CITY AK STATE 99645-9521 ZIP CODE

Title or Position: 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.

Northrim Bank

Mailing Address: P.O. Box 241489

Anchorage CITY AK STATE 99524 ZIP CODE

Name of Bank, Depository, etc.

Bank of America

Mailing Address: 600 N Washington Street

Alexandria CITY VA STATE 22314 ZIP CODE

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FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1S (Revised 06/2011)

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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.

[ADDITIONAL]

Name of Bank, Depository, etc.

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

Gardner Daines Sullivan Victory Fund

Mailing Address

901 N Washington Street

Suite 700

Alexandria

VA

22314-

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

_____ - _____

Title or Position ●

CITY ●

STATE ●

ZIP CODE ●

Telephone number

_____ - _____

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C _____

140201409042

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HANT SENATE OFFICE
SUITE 232
WASHINGTON, DC 20510-71
PHONE (202) 224-0222

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

6-4-14

USPS FIRST CLASS MAIL _____

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USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DEL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK.

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

PREPARER

DH

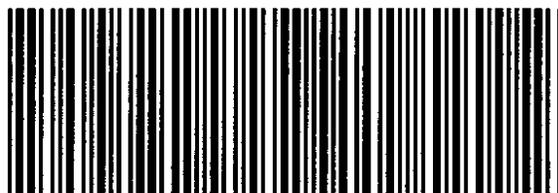
DATE PREPARED

6-4-14

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SEN PATCH



SEN PATCH

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