3031092151

FEC FORM 1

Office

Use Only

STATEMENT OF **ORGANIZATION**

2013 JUL 17 AM 11:44

| | | · | | Officer De Only |
|--|-----------------------------|--|---------------------------------------|------------------------------|
| NAME OF COMMITTEE (in full) | (Check if name is changed) | Example: If typing, type over the lines. | 12FE4M5 | TAIL CENTE |
| GREAT RIVE | RENERGY | AGTION TEA | MICGREA | <i>T</i>) |
| | | | | |
| ADDRESS (number and street) | 15803 HO | LDRIDGE RO | AD | |
| (Check if address is changed) | | · | | |
| | MAYZATAL | <u> </u> | MIN S | 5391-2145 ZIP CODEA |
| COMMITTEE'S E-MAIL ADDR | ESS | | , | |
| (Check if address is changed) | Igneat OGR | Energy Com | <u> </u> | لتبيبيا |
| | Optional Second E-Mail | • | | 1 |
| | <u> </u> | | · · · · · · · · · · · · · · · · · · · | |
| 001111111111111111111111111111111111111 | | | • | • |
| COMMITTEE'S WEB PAGE AL (Check if address | JUHESS (UHL) | | | • |
| is changed) | | | | |
| | | | | |
| | 0 2013 | | | |
| 2. DATE 6. | .0 20.1.3 | | | |
| 3. FEC IDENTIFICATION N | IUMBER ▶ C | 0.03.5.26.7.4 | | |
| 4. IS THIS STATEMENT | NEW (N) OR | AMENDED (A) | | |
| I certify that I have examined | this Statement and to the b | est of my knowledge and belief | f it is true, correct an | d complete. |
| Type or Print Name of Treasur | ROBERT | P. AMBROSE | · · · · · · · · · · · · · · · · · · · | |
| Signature of Treasure | dert b. h | mbrose | Date 0.7 | 10 2013 |
| NOTE: Submission of false, error | | on may subject the person signin | | penalties of 2 U.S.C. §437g. |

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

FEC FORM 1 (Revised 06/2012)

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|-------------------|-------|--|--|--|--|--|
| | | OMMITTEE | | | | |
| Cend | idate | 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 (Candid | | <u> </u> | | | | |
| Candid Party A | | Office State Senate President District | | | | |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | | | | |
| Name (Candid | | | | | | |
| Party | Com | mittee: | | | | |
| (d) | | This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party. | | | | |
| Politic | cal A | ction Committee (PAC): | | | | |
| (e) | X | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a | | | | |
| • | , , | 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 | Fund | raising 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. | | | | |
| | Com | mittees Participating in Joint Fundraiser | | | | |
| ٠. | 1. | FEC ID number | | | | |
| | 2. | FEC ID number | | | | |
| | 3. | FEC ID number | | | | |
| | 4. | | | | | |

| . FEC Form 1 (Revised | 02/2009) | Page 3 |
|--|--|--------------------------------|
| Write or Type Committee Nan | ne . | |
| GREAT RIVE | R ENERGY ACTION TEAM (GRE | AT) |
| | Organization, Affiliated Committee, Joint Fundraising Representative, or | |
| IAICITALGIAN ICISINA | MITTER MONIONAL ELECTRIC | |
| MICITION CON | MINTEE FOR RURAL ELECTRIA | <u> </u> |
| | | |
| Mailing Address | 4301 WILSON BOULENARD | |
| | | |
| | CITY STATE | 2122013 - 1/181610 ZIP CODE |
| Relationship: Connect | ed Organization Affiliated Committee Joint Fundraising Representative | Leadership PAC Sponsor |
| Custodian of Records: Identification books and records. | entify by name, address (phone number optional) and position of the person | on in possession of committee |
| Full Name RIOIB | ERT P. AMBROSE | |
| Mailing Address | 1.5803 HOLDRIDGE ROAD | |
| | | |
| | WAYZATA MIN | 1553911-12145 |
| Title or Position | CITY STATE | ZIP CODE |
| TREASURE | Telephone number | السا-لسا |
| 3. Treasurer: List the name a any designated agent (e.g., | nd address (phone number optional) of the treasurer of the committee; an assistant treasurer). | d the name and address of |
| Full Name of Treasurer | ERT P. AMBIROSE | · · |
| Mailing Address | 1.5803 HOLDRIDGE ROAD | |
| | | <u> </u> |
| ; | WAYZATA MIN ! | 55391-12145 |
| Title or Position | CITY STATE | ZIP CODE |
| TREASURER | Telephone number | |

(7)

(C)

M.

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. Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS** Express Mail Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):