



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

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2011 OCT 12 AM 8:12

RQ-1

FEC MAIL CENTER

September 27, 2011

JAMES R. KLAUDER, TREASURER  
KLAUDER4CONGRESS  
811 PARKVIEW PL W  
FERNANDINA BEACH, FL 32034

Response Due Date

11/01/2011

IDENTIFICATION NUMBER: C00502484

REFERENCE: STATEMENT OF ORGANIZATION

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the Statement of Organization referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **An adequate response must be received by the response date noted above.** Additional information is needed for the following 1 item(s):

- Your Statement of Organization (FEC Form 1) reports information about a Principal Campaign Committee; however, your filing fails to disclose information about the candidate. Commission Regulations require that the Statement of Organization disclose the name of the candidate, the office sought (including State and Congressional district, when applicable), and party affiliation of the candidate. (11 CFR 102.2(a)(v)). Please amend your Statement of Organization to include the State.

**Please note you will not receive an additional notice from the Commission on this matter.** Adequate responses received before the date will be taken into consideration in determining whether audit action will be initiated. **Requests for extensions of time in which to respond will not be considered.** Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

A copy of FEC FORM 1 can be downloaded from the FEC website at <http://www.fec.gov>, or requested through the FEC Faxline at (202) 501-3413. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1138.

*See amended  
FEC form 1  
attached.  
thanks*

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KLAUDER4CONGRESS

Page 2 of 2

Sincerely,

A handwritten signature in black ink, appearing to read "Seth Kaye".

Seth Kaye  
Senior Campaign Finance Analyst  
Reports Analysis Division

420

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FEC FORM 1

STATEMENT OF ORGANIZATION

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

12FE4M5

klauder4congress

ADDRESS (number and street)

811 Parkview Pl. W.

(Check if address is changed)

Fernandina Beach

FL

32034

CITY

STATE

ZIP CODE

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

(Check if address is changed)

info@klauder4congress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.klauder4congress.com

2. DATE

09 / 16 / 2011

3. FEC IDENTIFICATION NUMBER

C00502484

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

James Klauder

Signature of Treasurer

Date

09 / 16 / 2011

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)

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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 James R. Klauder

Candidate Party Affiliation  Rep  Office Sought:  House  Senate  President State  FL  District  04

- (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 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 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	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

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Write or Type Committee Name

klauder4congress

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

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

James R. Klauder

Mailing Address

811 Parkview Pl, W.

Fernandina Beach

FL

32034

Title or Position

CITY

STATE

ZIP CODE

candidate

Telephone number

904

583

1525

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

James R. Klauder

Mailing Address

811 Parkview Pl, W.

Fernandina Beach

FL

32034

Title or Position

CITY

STATE

ZIP CODE

treasurer

Telephone number

904

583

1525

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Full Name of Designated Agent

James R. Klauder

Mailing Address

811 Parkview Pl, W.

Fernandina Beach

CITY

FL

STATE

32034

ZIP CODE

Title or Position

candidate

Telephone number

904

583

1525

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.

Sun Trust

Mailing Address

5211 S. Fletcher Ave.

Fernandina Beach

CITY

FL

STATE

32034

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*etm*

10/12/11

PREPARER

DATE PREPARED

(3/2005)

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