



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-1

December 2, 2014

CARLTON GUSTAFSON, TREASURER
REPUBLICAN PARTY OF RENVILLE
COUNTY
74745 410 ST
BIRD ISLAND, MN 55310

Response Due Date
01/06/2015

IDENTIFICATION NUMBER: C00570580

REFERENCE: STATEMENT OF ORGANIZATION

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following 1 item(s):

- Your Statement of Organization indicates that your committee is a local party committee. However, Line 6 has been left blank which indicates that your committee may not be affiliated with the "Republican Party of Minnesota - Federal." However, pursuant to 11 CFR §110.3(b)(3), all contributions made by political committees established, financed, maintained, or controlled by the State party committee and by subordinate State party committees shall be presumed to be made by one political committee.

This presumption shall not apply if the political unit in question has not received funds from any other political committee established, financed, maintained, or controlled by any party unit and the political committee of the party unit in question does not make contributions in cooperation, consultation or concert with, or at the request or suggestion of any other party unit or political committee established, financed, maintained, or controlled by another party unit. Further, 11 CFR §100.5(e)(4) defines a party committee as a political committee which represents a political party and is part of the official party structure at the national, State, or local level.

Please clarify whether your committee is, in fact, independent from the "Republican Party of Minnesota - Federal." Further, any affiliated committee must be identified on your Statement of Organization. If there are no other

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REPUBLICAN PARTY OF RENVILLE COUNTY

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committees or organizations with which you share control or financing, please indicate "None" on Line 6. If you do share control or financing with other committees or organizations, please list their names, addresses, and relationships on Line 6. 11 CFR §102.2

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. 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. **Requests for extensions of time in which to respond will not be considered.**

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. 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) 694-1133.

Sincerely,



Christopher Morse
Senior Campaign Finance Analyst
Reports Analysis Division

2004-11-11 10:04:11 AM

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2014 DEC 10 AM 10:21

Office Use Only

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

12FE4M5

Republican Party of Renville County

ADDRESS (number and street) 74745 410 St

(Check if address is changed)

BIRD ISLAND MN 55310 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) gustafsonc@mvtvwireless.com

Optional Second E-Mail Address gkulberg@hotmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) www.renvillegop.com

2. DATE ?? / ?? / 1960 I do not know the begin date

3. FEC IDENTIFICATION NUMBER C 00570580

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 CARLTON GUSTAFSON

Signature of Treasurer Carlton Gustafson

Date 12 / 5 / 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.

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 _____

Candidate Party Affiliation Office Sought: House Senate President State District

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

Name of Candidate _____

Party Committee:

- (d) This committee is a SUB (National, State or subordinate) committee of the REP (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 _____

2009 JUN 11 10:43 AM

Write or Type Committee Name

REPUBLICAN PARTY OF RENVILLE COUNTY

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

NONE

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

CARLTON GUSTAFSON

Mailing Address

74745 410 ST

BIRD ISLAND MN 55310

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 320 - 365 - 4572

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

CARLTON GUSTAFSON

Mailing Address

74745 410 ST

BIRD ISLAND MN 55310

Title or Position

CITY

STATE

ZIP CODE

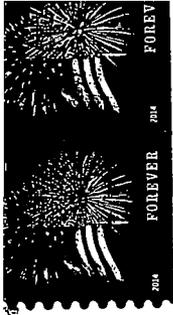
TREASURER

Telephone number 320 - 365 - 4572

1-800-4-A-VOICES

Renv Co Rep Party
74745 410 St
Bird Island, MN 55310

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MINNEAPOLIS MN 55401
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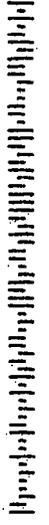


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FEDERAL ELECTION COMMISSION
999 E STREET, N.W.
WASHINGTON, DC 20463



20463



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WASHINGTON

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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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<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


PREPARER

12/10/14
DATE PREPARED

12/10/14