Image# 11930091649

## **STATEMENT OF**

FORM 1	ORGANIZ (See instruct			Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Integrys Energ	y Group, Inc PAC		1 1 1 1 1 1 1	
	400.5.7			
ADDRESS (number and s	treet) 130 E Randolph Dr			
(Check if address				
is changed)	Chicago			60601
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one	*		
(Check if address is changed)	WJGuc@integryse	nergy.com		
is a manages,				
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
(Check if address				
is changed)				
2. DATE 0.1	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00442707		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A	)	
I certify that I have examin	ned this Statement and to the best of my ki	nowledge and belief it is true, corre	ect and complete	
Turn or Drivet Name of	Treasurer William J Guc			
Type or Print Name of	Treasurer			
Signature of Treasurer	Electronically Filed by William	J Guc	Date 0 1	18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fal	se, erroneous, or incomplete information m	nay subject the person signing this	•	
Office Use Only		For further informat Federal Election Con Toll Free 800-424-95	nmission 530	FEC FORM 1 (Revised 02/2009)

	F	EC F	Form 1 (Revised 02/2009)	Page 2						
5.			OMMITTEE (Check One) 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 t information below.)	he candidate						
	Name Candid									
	Candid Party /	date Affiliati	Office Sought: House Senate President	State District						
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.							
	Name Candi									
	Party	Comn								
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.						
	Politic	cal Act	tion Committee (PAC):							
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:						
			X Corporation Corporation w/o Capital Stock La	bor Organization						
			Membership Organization Trade Association C	ooperative						
			In addition, this committee is a Lobbyist/Registrant PAC.							
	(f)	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party						
			In addition, this committee is a Lobbyist/Registrant PAC.							
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)							
_	Joint F	undra	alsing Representative:							
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political						
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	r more political						
		Com	mittees Participating in Joint Fundraiser							
			1. FEC ID number							
			2. FEC ID number							
			3. FEC ID number							
			EEC ID number C							

FEC Form 1 (Revised	d 02/2009)		Page 3
Write or Type Committee Nam	e		
Integrys Energy Grou	up, Inc PAC		
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative, or Lead	ership PAC Sponsor
Integrys Energy Group	o, Inc.		
		<u> </u>	
Mailing Address	130 E. Randolph		
	Chicago Chicago	<b></b>	60601
	CITY▲	STATE A	ZIP CODE
Relationship:  X Connected Organizati	on Affiliated Committee Joint F	undraising Representative	Leadership PAC Sponsor
7. Custodian of Records: possession of Committ Full Name Mailing Address	Identify by name, address, (phone number tee books and records.	optional), and position of the	ne person in
Title or Position <b>▼</b>	CITY A	STATE& Telephone number	ZIP CODE A
	ne and address (phone number optional) o any designated agent (e.g., assistant treasure	f the treasurer of the comm	ittee; and the
Full Name of Treasurer Will	iam J Guc		
Mailing Address	700 N Adams		
	Green Bay		54307
Title or Position ♥	CITY 🛦	STATE	ZIP CODE A
		Telephone number 920	433 2639

FEC Form 1	(Revised 02/	2009)										Page	4
Full Name of Designated Agent	_	David Waltz	2										
Mailing Address	_	13	30 E. Rar	ndolph									
	-	Cł	hicago						L_		60601		
Title or Position ▼			CI	ITY 🛦				ST	ATE 🛦		ZIP	CODE	A
As	ssistant Tr	easurer				Tele	phone n	number	312		240		4861
9. <b>Banks or Other D</b> safety deposit boxe Name of Bank, Dep	es or maintain pository, etc.	s funds.	s or other o	depositori	ies in wh	ich the d	committe	ee depo	osits fund	s, noids	accoun	ts, rents	
safety deposit boxe	es or maintain pository, etc.			depositori	ies in wh	ich the d	committe	ee depo	osits fund	s, noids	account	ts, rents	· 
safety deposit boxe Name of Bank, Dep	es or maintain pository, etc.	s funds. ated Bank	293	depositori	ies in wh	ich the d		ee depo	wi	s, holds	5320		3293
safety deposit boxe Name of Bank, Dep	es or maintain pository, etc.	ated Bank PO Box 32	93	depositori	ies in wh	ich the d	committe			s, holds	5320		3293
safety deposit boxe Name of Bank, Dep	Associa	ated Bank PO Box 32	93		ies in wh	ich the d	L L L		WI	s, holds	5320	)1   _ [	3293
safety deposit boxe Name of Bank, Dep Mailing Address	Associa	ated Bank PO Box 32	93		ies in wh	ich the d	committe		WI	s, holds	5320	)1   _ [	3293
safety deposit boxe Name of Bank, Dep Mailing Address	Associa	ated Bank PO Box 32	293	CITY A				SI	WI TATE 4		5320 ZIP	01 _ [	3293
safety deposit boxe Name of Bank, Dep Mailing Address  Name of Bank, Dep	Associa	s funds.	293	CITY A				SI	WI TATE 4		5320 ZIP	01 _ [	3293
safety deposit boxe Name of Bank, Dep Mailing Address  Name of Bank, Dep	Associa	s funds.	293	CITY A				SI	WI TATE 4		5320 ZIP	01 _ [	3293

**A.** Form/Schedule : **F1A**Transaction ID :