Image# 12970039663 PAGE 1 / 5

FEC FORM 1			TATEMI RGANI									ı
									Office U	se Only		
NAME OF COMMITTEE (in		is	Check if name changed)		mple: If typir the lines.	ng, type	12FE	4M5				
Denali Lea	dersh	ip PA									1 1	, , l
 		1 1 1									1 1	
ADDRESS (number a	nd street)	2755 Illia	mna									
	,	<u> </u>	1 1 1 1	1 1 1 1		1 1 1		1 1	1 1			
(Check if ac is changed)	ddress	Anchora	ge				AK		99517			
				CITY			STATE			ZIP CC	DE	
COMMITTEE'S E-MA	IL ADDRES	SS (Please	provide only on	e e-mail ad	dress)							
_		treasure	r@denalileader	shippac.org		1 1 1			1 1	1 1 1	1 1	
(Check if is change												
COMMITTEE'S WEB	PAGE ADD	DRESS (UF	RL)									
(0) 1 "												
(Check if is change		1			1 1 1 1		1 1 1		1 1			1
2. DATE 01	M / D 04	D / Y	2012									
3. FEC IDENTIFIC	CATION NU	JMBER	С	C0043829	1							
4. IS THIS STATEM	MENT X	NEW	(N) OR		AMEN	DED (A)						
I certify that I have e	examined th	is Stateme	nt and to the b	est of my l	knowledge a	and belief i	it is true, c	orrect a	and con	nplete.		
Torre on Driet Manage	· (T	Mary G	Gore									
Type or Print Name	or treasurer	<u>a.</u> , <u></u>										
Signature of Treasure	Mary G	Gore			[Electronico	ully Filed]	Date	M M	/ D	04)12
NOTE: Submission of			mplete informat GE IN INFORM						he pena	Ities of 2	2 U.S.C.	§437g.
Office					For further i	nformation (contact:		FE(C FO	 RM 1	

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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F	EC Fo	rm 1 (Revised 02/2009) Page 2
		OMMITTEE Committee
(a)	aldate	Committee: This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	ŏ	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate
Name Cand		information below.)
Cand Party	idate Affiliati	Office State Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Cand		
Part (d)	y Con	This committee is a (National, State (Democratic, Republican, etc.) Party.
Poli	tical A	ction 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)	X	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.)
Join	t 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
	1.	FEC ID number C
	2.	FEC ID number
	3.	FEC ID number
	4.	FEC ID number

FEC Form 1 (Revise	d 02/2009)	Page 3
Write or Type Committee Na	me	
Denali Leaders	ship PAC	
6. Name of Any Connected	1 Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
Senator Lisa Murkow	vski 	
Mailing Address	709 Hart Senate Building	
		00510
Relationship: Connec	CITY STATE ted Organization Affiliated Committee Joint Fundraising Representative	X Leadership PAC Sponsor
Custodian of Records: Id books and records.	dentify by name, address (phone number optional) and position of the persor	1 in possession of committee
Mary G Full Name	Gore	
Mailing Address		
	Anchorage AK 9	99517
Title or Position	CITY STATE	ZIP CODE
Custodian		
B. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and ., assistant treasurer).	the name and address of
Full Name Mary G of Treasurer	Gore	
Mailing Address	2755 liamna	
	Anchorage	9517 _
	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number 907	_ 868 0837

. 20 . 6 (evised 02/2009)	Page 4
Full Name of Designated Carol Agent	ol Sturgulewski	
Mailing Address	5120 Manytell Avenue	
	Anchorage AK	99516 ZIP CODE
Title or Position Assistant Treasurer		
safety deposit boxes or Name of Bank, Deposit		
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc.	
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc.	
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc. St Bank of Alaska PO Box 7920	99901
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc. St Bank of Alaska PO Box 7920	
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Form/Schedule: F1N Transaction ID:

This Statement of Organization is being filed to disclose a new address for the Committee, Custodian and Treasurer. In addition, the filing is marked as 'New' since it is the first registration filed electronically. Please update your records accordingly.

Form/Schedule: Transaction ID: