FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE
09 MAR 24 AM 9:01
Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Friends of John Thune

ADDRESS (number and street) 200 North Phillips Avenue, Suite L101

☒ (Check if address is changed)

Sioux Falls | SD | 57104 -

CITY | STATE | ZIP CODE

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

friends@johnthune.com

☐ (Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.johnthune.com

☐ (Check if address is changed)

2. DATE 03 / 11 / 2009

3. FEC IDENTIFICATION NUMBER C00409581

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 Cynthia Mickelson

Signature of Treasurer

Date 03 / 11 / 2009

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) [X] 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: John R. Thune

Candidate Party Affiliation: REP

Office Sought: [ ] House [X] Senate [ ] President

State: SD

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 [ ] (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 C
2. FEC ID number C
3. FEC ID number C
4. FEC ID number C

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Write or Type Committee Name

Friends of John Thune

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: Barb Buell

Mailing Address: 200 North Phillips Avenue, Suite L101

Sioux Falls | SD | 57104 -

CITY STATE ZIP CODE

Title or Position: Deputy Treasurer

Telephone number: 605 - 221 - 1010

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: Cynthia Mickelson

Mailing Address: 200 North Phillips Avenue, Suite L101

Sioux Falls | SD | 57104 -

CITY STATE ZIP CODE

Title or Position: Treasurer

Telephone number: 605 - 221 - 1010

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Full Name of Designated Agent: Barb Buell

Mailing Address: 200 North Phillips Avenue, Suite L101

Sioux Falls (CITY) SD (STATE) 57104 - (ZIP CODE)

Title or Position: Deputy Treasurer

Telephone number: 605 - 221 - 1010

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.: Schwab Institutional

Mailing Address: 3133 East Camel Back Road

Phoenix (CITY) AZ (STATE) 85016 - (ZIP CODE)

Name of Bank, Depository, etc.: Great Western Bank

Mailing Address: 200 East 10th Street

Sioux Falls (CITY) SD (STATE) 57104 - (ZIP CODE)

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SIOUX FALLS SD 57104-6059

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Friends of John THUNE

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NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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