PAGE 1/4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Buffalo Wild Wings Inc Political Action Committee (BWWPAC) 5500 Wayzata Blvd ADDRESS (number and street) Suite 1600 (Check if address is changed) Minneapolis 55416 MN CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS edecker@buffalowildwings.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2014 C00492157 FEC IDENTIFICATION NUMBER 3. X 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. **Emily Decker** Type or Print Name of Treasurer Emily Decker [Electronically Filed] 07 2014 Signature of Treasurer Date 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. FEC FORM 1

| Office |  |  | For further information contact: |
|--------|--|--|----------------------------------|
| Use    |  |  | Federal Election Commission      |
|        |  |  | Toll Free 800-424-9530           |
| Only   |  |  | Local 202-694-1100               |

|             | FEC Fo                | rm 1 (Revised 02/2009)   | Page 2                                |
|-------------|-----------------------|--|---------------------------------------|
|             |                       | COMMITTEE  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. (Compleinformation below.)   | ete the candidate                     |
| Nam<br>Can  | e of<br>didate        |  |                                       |
|             | didate<br>y Affiliati | on Office Sought: House Senate President   | State                                 |
| (c)         |                       | This committee supports/opposes only one candidate, and is NOT an authorized committee.  |                                       |
| Nam<br>Cand | e of<br>didate        |  |                                       |
| Par         | ty Con                | nmittee:   |                                       |
| (d)         |                       | · · · · · · · · · · · · · · · · · · ·  | emocratic,<br>epublican, etc.) Party. |
| Poli        | itical A              | action Committee (PAC):  |                                       |
| (e)         | $\times$              | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected   | ected organization is a               |
|             |                       | X Corporation Corporation w/o Capital Stock  | _abor 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 segrecommittee. (i.e., nonconnected committee)  | egated 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.)   |                                       |
| Join        | t Fund                | Iraising Representative:   |                                       |
| (g)         |                       | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate. | or 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.         | or more political                     |
|             | Com                   | mittees Participating in Joint Fundraiser  |                                       |
|             | 1.                    | FEC ID number C  |                                       |
|             | 2.                    | FEC ID number  |                                       |
|             | 3.                    | FEC ID number  |                                       |
|             | Δ                     |  |                                       |

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|---|---|--------------------|
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| Write or Type Committee Name                              | 9   |                    |
| Buffalo Wild Wi   | ngs Inc Political Action Committee (BWWPA   | AC)                |
| 6. Name of Any Connected C                                | Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership                     | PAC Sponsor        |
| Buffalo Wild Wings, In                                    | <b>c</b> .  |                    |
|   |   |                    |
| Mailing Address   | 5500 Wayzata Boulevard  |                    |
|   |   |                    |
|   | Minneapolis MN 55416  |                    |
|   | CITY STATE ZI   | P CODE             |
| Relationship: X Connected                                 | d Organization Affiliated Committee Joint Fundraising Representative Leader                             | ership PAC Sponsor |
| _   |   |                    |
|   | ntify by name, address (phone number optional) and position of the person in posse                      | ssion of committee |
| books and records.  |   |                    |
| Emily Dec   | ker   |                    |
| Mailing Address   | 3155 Lafayette Ridge Road   | <b>.</b>           |
| Maining Address   |   |                    |
|   | Wayzata , MN , 55391  |                    |
|   | Wayzada   |                    |
| Title or Position   | CITY STATE ZIF  | CODE               |
| Treasurer   |   | 0 2052             |
| Treasurer: List the name an any designated agent (e.g., a | d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer). | and address of     |
| Full Name Emily Decl                                      | ker   | 1                  |
|   | 3155 Lafayette Ridge Road   |                    |
| Mailing Address   |   |                    |
|   | Wayzata   | .  _               |
|   |   | P CODE             |
| Title or Position<br>Treasurer                            |   | )  _  2052         |

Telephone number

| FEC Form 1 (R  | Revised 02/2009)   |                   | Page <b>4</b>               |
|--|--|-------------------|-----------------------------|
|  |  |                   |                             |
| Full Name of Designated Agent  |  | 1 1 1 1           |                             |
| Mailing Address  |  |                   |                             |
|  |  |                   |                             |
|  | CITY   | STATE             | ZIP CODE                    |
| Title or Position  |  |                   |                             |
|  | Telephone no   | umber             |                             |
| Banks or Other Depo<br>safety deposit boxes of<br>Name of Bank, Deposi   |  | nittee deposits f | unds, holds accounts, rents |
| safety deposit boxes of<br>Name of Bank, Deposi  | r maintains funds.  itory, etc.  ells Fargo  420 Montgomery Street         |                   |                             |
| safety deposit boxes of Name of Bank, Deposi   | r maintains funds. itory, etc. ells Fargo                                  | nittee deposits f | unds, holds accounts, rents |
| safety deposit boxes of Name of Bank, Deposi   | r maintains funds.  itory, etc.  ells Fargo  420 Montgomery Street         |                   |                             |
| safety deposit boxes of Name of Bank, Deposi   | r maintains funds.  itory, etc.  20 Montgomery Street  San Francisco  CITY | CA                | 94104                       |
| safety deposit boxes of Name of Bank, Deposition Mailing Address   | r maintains funds.  itory, etc.  20 Montgomery Street  San Francisco  CITY | CA STATE          | 94104                       |
| safety deposit boxes of Name of Bank, Deposition Mailing Address   | r maintains funds.  itory, etc.  20 Montgomery Street  San Francisco  CITY | CA STATE          | 94104                       |
| safety deposit boxes of Name of Bank, Deposition Mailing Address  Name of Bank, Deposition Deposition Name of Bank, Deposition Deposition Name of Bank, Deposition Deposition Name of Bank, Deposition Name of Bank, Deposition Deposition Name of Bank, Deposition Name of Ban | r maintains funds.  itory, etc.  20 Montgomery Street  San Francisco  CITY | CA STATE          | 94104                       |
| safety deposit boxes of Name of Bank, Deposition Mailing Address  Name of Bank, Deposition Deposition Name of Bank, Deposition Deposition Name of Bank, Deposition Deposition Name of Bank, Deposition Name of Bank, Deposition Deposition Name of Bank, Deposition Name of Ban | r maintains funds.  itory, etc.  20 Montgomery Street  San Francisco  CITY | CA STATE          | 94104                       |