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FEC
FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)



(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

7TH CONGRESSIONAL DISTRICT REPUBLICAN PARTY
OF MINNESOTA

ADDRESS (number and street)

506 CHARLES AVE.



(Check if address is changed)

MARSHALL

MN

56258

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

DESTURROCK@charter.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

05 17 2005

3. FEC IDENTIFICATION NUMBER ▶

C00380873

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

DAVID E. STURROCK

Signature of Treasurer

Date

05 17 2005

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 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 _____

- (d) This committee is a SUB (National, State or subordinate) committee of the REP ~~(Democratic~~ Republican, etc.) Party OF MINNESOTA

- (e) This committee is a separate segregated fund.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

REPUBLICAN PARTY OF MINNESOTA

Mailing Address 525 PARK ST.

SUITE 250

ST. PAUL MN 55103

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship AFFILIATED

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

25038815751

Write or Type Committee Name

7TH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA

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 DAVID E. STURROCK

Mailing Address 506 CHARLES AVE.

MARSHALL MN 56258

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 507-537-0554

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 DAVID E. STURROCK

Mailing Address 506 CHARLES AVE.

MARSHALL MN 56258

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 507-537-0554

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

25038613752

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.

BREMER BANK

Mailing Address

208 E. COLLEGE DRIVE

MARSHALL

MN

56258-

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲


STATE ▲

ZIP CODE ▲

25038813753

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"/> No Postmark	
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
 (3/2005)

5/23/05
DATE PREPARED

25036615754