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FEC FORM 1

Only

STATEMENT OF ORGANIZATION

2012 APR 30 AM 8: 43 FEC MAIL CENTER

Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Heaster for Congress **Grey Moss Ct** ADDRESS (number and street) (Check if address is changed) 53089 CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) ıme@20dave12.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) 04" '23° '2012 ` DATE C **FEC IDENTIFICATION NUMBER** IS THIS STATEMENT **OR** AMENDED (A) NEW (N) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. **Rodney Bartlow** Type or Print Name of Treasurer 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. Office For further information contact: **FEC FORM 1** Federal Election Commission Use Toll Free 800-424-9530 (Revised 02/2009)

Local 202-694-1100

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		OMMITTEE	
Qe	andidate	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below	w.)
(b)	Ц	This committee is an authorized committee, and is NOT a principal campaign committee. (Coinformation below.)	omplete the candidate
	me of ndidate	David LeMaire Heaster	
Ca	ndidate		State WI
Pai	rty Affiliati	on DEM Sought: House Senate President	District 05
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	me of ndidate		
Pa	arty Con	nmittee:	
(d)		(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Po	litical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	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 committee. (i.e., nonconnected committee)	segregated 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.)	
Joi	int Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for	
(b)		committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for	
(h)		committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number C	
	3.	FEC ID number C	
	4.		

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Write or Type Committee	Name	
Heaster for C	ongress	
6. Name of Any Connec	ted Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
_I None:	· 	
		<u> </u>
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
		1
7. Custodian of Records books and records.	: Identify by name, address (phone number optional) and position of the person in	possession of committee
ıTre	easurer	
Full Name		<u> </u>
Mailing Address		
		لــــا-لـــــا
Title or Position	CITY STATE	ZIP CODE
L	Telephone number	لـنــا-لــنــا
	ne and address (phone number optional) of the treasurer of the committee; and the e.g., assistant treasurer).	name and address of
Full Name of Treasurer	dney Bartlow	
Mailing Address	2780 County Road CC	
	_	
	Slinger [WI] [530)86
Title or Position	Slinger WI 530	2IP CODE

CITY

STATE

ZIP CODE

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Mailing Address

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(3/2005)