

WASHOE COUNTY REPUBLICAN PARTY

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FEC MAIL CENTER

June 25, 2012

The Honorable Caroline C. Hunter, Chair
The Honorable Ellen L. Weintraub, Vice-Chair
Federal Election Commission
999 E Street NW
Washington, DC 20463

Dear Chair Hunter and Vice-Chair Weintraub:

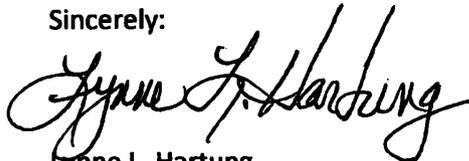
Enclosed please find a Form 1 Statement of Organization for the Washoe County Republican Party (WCRP).

Under Commission regulations at 11 CFR 110.3(b)(3), the WCRP is not affiliated with the Nevada Republican State Central Committee (NRSCC). Specifically, the WCRP confirms to the Commission that it is not funded by the NRSCC; is not under the management or control of the NRSCC; and does not conduct its activity (including making contributions) in cooperation, consultation or concert with, or at the request or suggestion of the NRSCC, or any other political committee established, financed, maintained, or controlled by the NRSCC.

Accordingly, the WCRP will conduct its activity as a federal local party committee that is unaffiliated with its state party committee.

Please do not hesitate to contact me at (775)827-1900, if there is any additional information I can provide.

Sincerely:



Lynne L. Hartung
Treasurer, Washoe County Republican Party

Paid for by the Washoe County Republican Party (775)827-1900

3652 S. Virginia Street, Reno, NV 89502, washoecountygop.org

Not Authorized by any Candidate or Candidate Committee

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FEC
FORM 1

STATEMENT OF
ORGANIZATION

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1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Washoe County Republican Party

ADDRESS (number and street)

3652 S. Virginia St., Suite C-8

(Check if address
is changed)

Reno

NV

89502

CITY

STATE

ZIP CODE

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

(Check if address
is changed)

chrissie@incompliance.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

washoecountygop.org

2. DATE

06^M / 22^D / 2012^Y

3. FEC IDENTIFICATION NUMBER

C

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

Lynne L. Hartung

Signature of Treasurer

Date

06^M / 22^D / 2012^Y

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) 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 _____

Party Committee:

- (d) This committee is a **STA** (National, State or subordinate) committee of the **REP** (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

Washoe County Republican Party

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N/A

Mailing Address

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 **Chrissie Hastie**

Mailing Address **PO Box 751271**

Las Vegas **NV** **89136**

Title or Position CITY STATE ZIP CODE

Consultant Telephone number **702** - **259** - **5559**

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 **Lynne L. Hartung**

Mailing Address **3652 S. Virginia St., Suite C-8**

Reno **NV** **89502**

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number **775** - **827** - **1900**

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Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

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.

Wells Fargo [Grid]

Mailing Address

4045 S. Virginia St. [Grid]

[Grid for Mailing Address Line 2]

Reno [Grid] NY [Grid] 89502 [Grid]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

12030823957

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Ex* Shipping Date
6/22/12
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


PREPARER
(3/2005)

6/25/12
DATE PREPARED

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