FEC FORM 1		STATEME ORGANIZ	Office Use Only							
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5						
Jeff Anders	son for l	Minnesota								
		20 Box 323								
ADDRESS (number an	nd street)									
(Check if ad is changed)		 Duluth		5	5801 					
			CITY	STATE	ZIP CODE					
COMMITTEE'S E-MAI (Check if a is changed COMMITTEE'S WEB	address ^{یا)} ل PAGE ADDRE	Please provide only one e nfo@jeffanderson.org								
2. DATE	i)	/ Y Y Y Y Y 2012		1 1 1 1 1 1						
3. FEC IDENTIFIC	ation nume	BER C C	00498030							
4. IS THIS STATEM	IENT X	NEW (N) OR	AMENDED (A)							
Type or Print Name o	of Treasurer Bill Leino r	Bill Leino	t of my knowledge and belief it [Electronically Filed] may subject the person signing t ON SHOULD BE REPORTED W	Date 05	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	ontact:	FEC FORM 1 (Revised 02/2009)					

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		rm 1 (Pavisod 02/2000)	Dogo 2
		rm 1 (Revised 02/2009)	Page 2
Car	ndidate	e 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 information below.)	e the candidate
	ne of didate		
	didate y Affiliati	on DFL Office Sought: X House Senate President	State MN District 08
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	ne of didate		
Par	ty Con	nmittee:	
(d)			nocratic, ublican, etc.) Party
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is
		Corporation Corporation w/o Capital Stock	bor Organization
		Membership Organization Trade Association Co	ooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	pated 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	nt Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

Title or Position

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Write or Type Committee Name

Jeff Anderson for Minnesota

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

I										
	Mailing Address									
		CITY		STATE	ZIP CODE					
	Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor									
7.	Custodian of Records: Ider books and records.	tify by name, address (phone numbe	optional) and position	on of the person	in possession of committee					
	Jeff Ander	son								
	Full Name									
	Mailing Address	PO Box 385								
		 Duluth		MN 55	801					

Candidate	Telephone number	218 590 5970
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STATE

ZIP CODE

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).

CITY

Full Name of Treasurer		
Mailing Address	102 Minneapolis Ave	
	Duluth	
	CITY STATE ZIP CODE	
Title or Position	Telephone number 218 343 8896	

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Full Name of Designated Agent																		I										
Mailing Address																												
																					L							
								CI	ΓY								ST/	λΤΕ					ZI	ΡC	DE			
Title or Position																												
												Tel	eph	ione	e ni	umt	ber											

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.

Weste	rn Bank		
Mailing Address	202 W Superior St		
	Duluth	MN 55816	
	CITY	STATE ZIP CODE	
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE ZIP CODE	