## **STATEMENT OF**

FORM 1	ORGANIZA (See instruction			Office use only
NAME OF COMMITTEE (in the community of the community	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Minnick for Co	ongress			
ADDRESS (number and s	P O Box 288		<u> </u>	
(Check if address is changed)	MERIDIAN		<u>  IP</u>	83642
		CITY▲	STATE▲	ZIP CODE 🛦
COMMITTEE'S E-MAI  (Check if address is changed)	L ADDRESS (Please provide only one e-	, ,		
COMMITTEE'S WEB  (Check if address is changed)	PAGE ADDRESS (URL)  http://www.waltforco	ongress.org		
2. DATE 0 3	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00441105		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A	<b>(</b> )	
I certify that I have examine Type or Print Name of	ned this Statement and to the best of my kno  Treasurer   Vern Bisterfeldt	wledge and belief it is true, corr	ect and complete	
Signature of Treasurer	Electronically Filed by <b>Vern Biste</b>	erfeldt	Date 03	18 YYYYY 2010
NOTE: Submission of fall	se, erroneous, or incomplete information may		·	
Office Use Only		For further informa Federal Election Cor Toll Free 800-424-9	mmission 530	FEC FORM 1 (Revised 02/2009)

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5.		OF COMMITTEE (Check One) ate 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 information below.)	candidate						
	Name of Candida	Waller C Willings							
	Candida Party Aff	V	State ID  District 01						
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.							
	Name of Candida								
	Party Co	arty Committee:							
	(d)	(National, State (Example 1) This committee is a (Or subordinate) committee of the R	Democratic, epublican,etc.) Party.						
	Political Action Committee (PAC):								
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected or	organization is a:						
		Corporation Corporation w/o Capital Stock Labor	Organization						
		Membership Organization Trade Association Coop	perative						
		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 fu committee. (i.e., nonconnected committee)	und or party						
		In addition, this committee is a Lobbyist/Registrant PAC.							
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)							
	loint Eur	ndraising Representative:							
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, at least one of which is an authorized committee of a federal candidate.	iore political						
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or modern committees/organizations, none of which is an authorized committee of a federal candidate.	nore political						
	(	Committees Participating in Joint Fundraiser							
		1. FEC ID number C							
		2. FEC ID number C							
		3. FEC ID number C							
		.   FEC ID number   C							

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Write or Type Committee Name			
Minnick for Congress			
6. Name of Any Connected O	rganization, Affiliated Committee,	Joint Fundraising Representative,	or Leadership PAC Sponsor
JARED POLIS VICTORY	FUND		1   1   1   1   1   1   1   1   1   1
Mailing Address	P O BOX 1174		
	SPRINGFIELD		22151
	CITY	STATI	E▲ ZIP CODE ▲
Relationship:			
Connected Organization	Affiliated Committee	X Joint Fundraising Representa	tive Leadership PAC Sponsor
possession of Committee	e books and records.  Smiley	ne number optional), and posi	tion of the person in
Mailing Address	102 Waterman	St, Suite 2	
	Providence	RI	02906
Title or Position ▼	CITY A	STAT	EA ZIP CODE A
Deputy T	reasurer	Telephone number	
name and address of an	e and address (phone number - y designated agent (e.g., assis Bisterfeldt 9779 Martingal		e committee; and the
-			
	Boise		83709_ –
Title or Position ♥	CITY	STAT	ZIP CODE A
Treasure	r	Telephone number	208 377 _ 2500

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Full Name of Designated Agent	Brett Smiley			
Mailing Address	102 Waterman St, Suite 2			
	Providence	RI	02906 –	
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A	
Deputy	Treasurer To	elephone number 401	454 0991	
Banks or Other Deposite safety deposit boxes or ma Name of Bank, Depository	aintains funds. ,, etc.	e committee deposits funds, h	olds accounts, rents	
safety deposit boxes or management Name of Bank, Depository  US	aintains funds.	e committee deposits funds, h	olds accounts, rents	
safety deposit boxes or ma Name of Bank, Depository	aintains funds.	e committee deposits funds, h	olds accounts, rents	
safety deposit boxes or management Name of Bank, Depository  US	aintains funds.	e committee deposits funds, h	olds accounts, rents	
safety deposit boxes or management Name of Bank, Depository  US	aintains funds.  y, etc.  Bank  205 N. 10th Street			
safety deposit boxes or management Name of Bank, Depository  US	aintains funds.  y, etc.  Bank  205 N. 10th Street  Boise  CITY A		83702	
safety deposit boxes or management Name of Bank, Depository  US  Mailing Address  Name of Bank, Depository	aintains funds.  y, etc.  Bank  205 N. 10th Street  Boise  CITY A		83702	
safety deposit boxes or management Name of Bank, Depository  US  Mailing Address  Name of Bank, Depository	aintains funds.  y, etc.  Bank  205 N. 10th Street  Boise  CITY   y, etc.		83702	
Safety deposit boxes or management of Bank, Depository  Mailing Address  Name of Bank, Depository  Name of Bank, Depository	aintains funds.  y, etc.  Bank  205 N. 10th Street  Boise  CITY   A  y, etc.  NNK OF AMERICA		83702	
Safety deposit boxes or management of Bank, Depository  Mailing Address  Name of Bank, Depository  Name of Bank, Depository	aintains funds.  y, etc.  Bank  205 N. 10th Street  Boise  CITY   A  y, etc.  NNK OF AMERICA		83702   _	

Banks or Other Depositories: safety deposit boxes or maintains	List all banks or other depositories in which the committees funds.	e deposits funds, hol	ds accounts, rents
Name of Bank, Depository, etc.			[ ADDITIONAL ]
Mailing Address			
	CITY 🛕	STATE.▲	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Joint Fundraising Repre	sentative, or Leade	[ ADDITIONAL ] rship PAC Sponsor
Right for Idaho			
Mailing Address	PO Box 306		
	Boise	l LID L	83701 
elationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee X Joint Fundraising Repre	esentative Lea	dership PAC Sponsor
Designated Agent			[ ADDITIONAL ]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE. <b>▲</b>	ZIP CODE A
	Telephone	e number	
Joint Fundraiser Participant			[ ADDITIONAL ]
1		ID number C	