FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGA	ANIZATIC	N		
	(See	e instructions)			Office use only
NAME OF COMMITTEE (in	full) (Check is change		ample: If typying, type or the lines	12FE4M5	
Franken Reco	ount Fund				
ADDRESS (number and	street) 4190 Vinewo	ood Lane, #111	-554 		
(Check if addition is changed)	ress Minneapolis	<u> </u>	<u> </u>	MN	
		0.77.4			
COMMITTEE'S E-MA	AIL ADDRESS	CITY.	•	STATE▲	ZIP CODE 📥
shellihesselre	th@gmail.com	11111		1111	
	<u> </u>				
COMMITTEE'S WEE	PAGE ADDRESS (URL)				,
1		11111		11111	1
COMMITTEE'S FAX 7633745939 2. DATE 1.1	M / D D / Y Y Y	8 [*]			
3. FEC IDENTIFIC	ATION NUMBER	C co	0457119	1	
4. IS THIS STATE	MENT X NEW (N)	OR	AMENDED (A)	1	
I certify that I have exam	nined this Statement and to the bes	st of my knowledge a	nd belief it is true, correct an	d complete	
Type or Print Name o	Treasurer Thomas	Borman			
Signature of Treasure	r Electronically Filed by T	homas Borman	1	Date 12 ^M	03 / 2008
NOTE: Submission of f	alse, erroneous, or incomplete info		the person signing this State		es of 2 U.S.C. S437g.
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 12/2007)

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	FEC	C Form 1 (Revised 12/2007)	Page 2
		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 information below.)	candidate
	Name of Candidate	e	1 1 1 1 1 1
	Candidate Party Affi		State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	e	
	Party Co		
	(d)		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 Labo	r Organization
		Membership Organization Trade Association Coo	perative
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated f committee. (i.e., nonconnected committee)	und or party
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
,	Joint Fun	draising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or r 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
	С	committees Participating in Joint Fundraiser	
		Al Franken for Senate 1. FEC ID number C 00432278	3
		2. Minnesota DFL FEC ID number C 00025254	ı
		3. FEC ID number	
		4. FEC ID number C	
		5 FEC ID number C	

Write or Type Committee Name Franken Recount Fund 6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Represe NONE Mailing Address CITY STATE ZIP C Relationship: Connected Organization Affiliated Committee Leadership PAC Sponsor X Joint Fundraising 7. Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records. Shelli Hesselroth	
6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Represe NONE Mailing Address CITY STATE ZIP C Relationship: Connected Organization Affiliated Committee Leadership PAC Sponsor X Joint Fundraising CITY STATE ZIP C Relationship: Connected Organization Affiliated Committee Leadership PAC Sponsor X Joint Fundraising	
NONE Mailing Address CITYA STATE ZIP C Relationship: Connected Organization Affiliated Committee Leadership PAC Sponsor X Joint Fundraising 7. Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records. Shelli Hesselroth	
Mailing Address CITY STATE ZIP C Relationship: Connected Organization Affiliated Committee Leadership PAC Sponsor Joint Fundraising 7. Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records. Shelli Hesselroth	ntative
CITY▲ STATE ★ ZIP C Relationship: Connected Organization	
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Relationship: Connected Organization Affiliated Committee Leadership PAC Sponsor X Joint Fundraising 7. Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records. Shelli Hesselroth	
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possession of Committee books and records. Shelli Hesselroth	Representative
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Mailing Address 4190 Vinewood Lane, #111-554	
Minneapolis MN 55442	
Title or Position ▼ CITY A STATE A ZIP C	ODE A
Assistant Treasurer Telephone number 763 - 559	- 7737
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 Thomas Borman	9
Mailing Address 4190 Vinewood Lane, #111-554	
Minneapolis MN 55442	
Title or Position ♥ CITY A STATE A ZIP 0	
Treasurer Telephone number 763 559	

FEC Form 1 (Revis	sed 12/2007)		Page 4			
Full Name of Designated Agent	Shelli Hesselroth					
Mailing Address	4190 Vinewood Lane, #111-554					
	Minneapolis	MN	55441_ –			
Title or Position ▼	CITY A	STATE A	ZIP CODE A			
Assista	ant Treasurer Te	lephone number 763	559 7737			
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.						
safety deposit boxes or m Name of Bank, Depositor	naintains funds. y, etc.	e committee deposits funds, h	olds accounts, rents			
safety deposit boxes or m Name of Bank, Depositor	ells Fargo	e committee deposits funds, h	olds accounts, rents			
safety deposit boxes or m Name of Bank, Depositor	naintains funds. y, etc.	e committee deposits funds, h	olds accounts, rents			
safety deposit boxes or m Name of Bank, Depositor	ells Fargo	e committee deposits funds, h	olds accounts, rents			
safety deposit boxes or m Name of Bank, Depositor	ells Fargo	e committee deposits funds, h	olds accounts, rents			
safety deposit boxes or m Name of Bank, Depositor	ells Fargo 255 2nd Ave. S.					
safety deposit boxes or m Name of Bank, Depositor	ells Fargo 255 2nd Ave. S. Minneapolis CITY CITY CITY Maintains funds.		55401			
safety deposit boxes or m Name of Bank, Depositor W Mailing Address	ells Fargo 255 2nd Ave. S. Minneapolis CITY CITY CITY Maintains funds.		55401			
safety deposit boxes or m Name of Bank, Depositor W Mailing Address	ells Fargo 255 2nd Ave. S. Minneapolis CITY CITY CITY Maintains funds.	MN STATE △				
safety deposit boxes or m Name of Bank, Depositor W Mailing Address Name of Bank, Depositor	ells Fargo 255 2nd Ave. S. Minneapolis CITY y, etc.	MN STATE △				
safety deposit boxes or m Name of Bank, Depositor W Mailing Address Name of Bank, Depositor	ells Fargo 255 2nd Ave. S. Minneapolis CITY y, etc.	MN STATE △				

Banks or Other Depositories: safety deposit boxes or maintain		the committee deposits fund	ds, holds accounts, rents
Name of Bank, Depository, etc.	c.		[ADDITIONAL]
Mailing Address			
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	anization, Affiliated Committee, Leadership	PAC Sponsor or Joint Fun	[ADDITIONAL] draising Representative
Mailing Address			
Relationship:	CITY	STATE A	ZIP CODE 🛦
Connected Organization	Affiliated Committee Leadership	PAC Sponsor Joir	nt Fundraising Representative
Designated Agent			[ADDITIONAL]
	O'Leary 4190 Vinewood Lane, #111-554		
	Minneapolis		55442
Title or Position ▼	CITY A	STATE	ZIP CODE A
Assistant	Treasurer	. Telephone number _	763 559 7737
Joint Fundraiser Participant			[ADDITIONAL]
		FEC ID number	C