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**FEC  
FORM 1**

# STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

SECRETARY OF THE SENATE  
02 JUN -3 PM 12:32

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines. 12FB4M5  
Johnson Wellstone Event Committee

ADDRESS (number and street) (Check if address is changed)  
607 14th Street NW  
Suite 800  
Washington DC 20005

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS  
PLGroup@parkinscole.com

COMMITTEE'S WEB PAGE ADDRESS (URL)  
None


2. DATE 05 20 2002

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 A.J. Goodman

Signature of Treasurer  Date 05 20 2002

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.

5. TYPE OF 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 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 \_\_\_\_\_

(d)  This committee is a  (National, State (or subordinate) committee of the  (Democratic, Republican, etc.) Party.

(e)  This committee is a separate segregated fund

(f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

Joint Fundraising Committee

6. Name of Any Connected Organization or Affiliated Committee

See Attached Pages \_\_\_\_\_  
 \_\_\_\_\_

Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

Write or Type Committee Name

**Johnson Wallstone Event Committee**

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 A.J. Goodman

Mailing Address 607 14th Street NW  
Suite 800  
Washington DC 20005

Title or Position ▼ Treasurer CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number \_\_\_\_\_

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 A.J. Goodman

Mailing Address 607 14th Street NW  
Suite 800  
Washington DC 20005

Title or Position ▼ Treasurer CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number \_\_\_\_\_

Full Name of Designated Agent N/A

Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Title or Position ▼ \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number \_\_\_\_\_

B. **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.

	Citibank		
Mailing Address	1400 G Street NW		
	Washington	DC	20005
	CITY ▲	STATE ▲	ZIP CODE ▲

**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.

[ **ADDITIONAL** ]

\_\_\_\_\_

Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

CITY ▲                      STATE ▲                      ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ **ADDITIONAL** ]

Wellstone for Senate \_\_\_\_\_  
 \_\_\_\_\_

Mailing Address PO Box 14377 \_\_\_\_\_  
 \_\_\_\_\_

St. Paul \_\_\_\_\_ MN \_\_\_\_\_ 55114 \_\_\_\_\_

CITY ▲                      STATE ▲                      ZIP CODE ▲

Relationship Affiliated \_\_\_\_\_

Type of Connected Organization:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Corporation             | <input type="checkbox"/> Corporation w/b Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association             | <input type="checkbox"/> Cooperative        |

**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.

[ ADDITIONAL ]

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CITY ▲                      STATE ▲                      ZIP CODE ▲

**Name of Any Connected Organization or Affiliated Committee**

[ ADDITIONAL ]

Tim Johnson for South Dakota, Inc.

\_\_\_\_\_

Mailing Address

PO Box 1859

Sioux Falls

SD

57101

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Affiliated

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization


Trade Association

Cooperative

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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# United States Senate

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