

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED

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Office Use Only

FEC MAIL CENTER

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Mark Stevens For President

ADDRESS (number and street) 921 4th Ave NE

(Check if address is changed)

Staples

MN

56479

3040

CITY

STATE

ZIP CODE

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

(Check if address is changed)

mrmrk65@charter.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 11 ' 04 ' 2011

3. FEC IDENTIFICATION NUMBER C 00504456

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 \_\_\_\_\_

Signature of Treasurer Mark S. Stevens Date 11 ' 04 ' 2011

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.

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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 **NTI** 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 \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (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

**Mark Stevens For President**

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

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 **Mark S. Stevens**

Mailing Address **921 4th Ave NE**

**Staples** **MN** **56479** - **3040**

Title or Position

CITY

STATE

ZIP CODE

**Canidate**

Telephone number **218** - **371** - **7870**

**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

Mailing Address

[Empty grid lines for treasurer address]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid lines for treasurer title]

Telephone number [Empty grid lines for treasurer phone]

11030690320

Full Name of Designated Agent

Carrie Lee Stevens

Mailing Address

921 4th Ave NE

Staples

CITY

MN

STATE

56479

ZIP CODE

-3040

Title or Position

Candidates Wife

Telephone number

218

-371

-8087

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.

First International Bank & Trust

Mailing Address

111 4th ST NE

PO Box 40

Staples

CITY

MN

STATE

56479

ZIP CODE

-0040

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

11030690321

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked  
11/9/11

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USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

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Other (Specify): Date of Receipt or Postmarked

*ELM*  
PREPARER

11/14/11  
DATE PREPARED

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