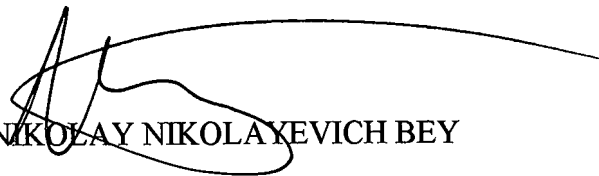


NIKOLAY NIKOLAYEVICH BEY
P.O. BOX 25511
St. Paul, Minnesota 55125
651-800-6939 Telephone

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FEC MAIL CENTER
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SECRETARY OF THE SENATE
PUBLIC RECORDS
5/30/2018
2018 JUN -6 PM 1:00 2018 JUN -6 PM 5:33
nikbeyjr@gmail.com

To: Federal Election Commission,
1050 First Street, NE,
Washington, DC 20463

Please see within my FEC FORM 1. Based on your web site, I do not see any other forms that are to be done, other than FEC FORM 2, which I also provide within, please let me know if I am correct or not correct?



NIKOLAY NIKOLAYEVICH BEY

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FEC
FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

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

12FE4M5

Nikolay Nikolayevich Bey for Senate

ADDRESS (number and street)

P.O. Box 25511

(Check if address is changed)

St Paul

CITY ▲

MN

STATE ▲

55125

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

nikbeyjr@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

http://nikolaynikolayevichbey.blogspot.com/

2. DATE

MM / DD / YYYY
05 / 30 / 2018

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

Bey, Nikolay, . . .

Nikolay Bey

Signature of Treasurer

Bey, Nikolay, . . .

Date

MM / DD / YYYY
05 / 30 / 2018

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.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530

FEC FORM 1
(Revised 06/2012)

201806070200430319

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 Bey, Nikolay, Nikolayevich, ,

Candidate Party Affiliation: REP Office Sought: House Senate President State: MN District: 00

- (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	<input checked="" type="checkbox"/> C _____
2.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____
3.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____
4.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____

201806070200430320

Write or Type Committee Name

Nikolay Nikolayevich Bey for Senate

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

NONE

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 Bey, Nikolay, . . .

Mailing Address 2563 Alpine Drive

Woodbury MN 55125

Title or Position CITY STATE ZIP CODE

Telephone number 651 - 800 - 6939

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 Bey, Nikolay, . . .

Mailing Address 2563 Alpine Drive

Woodbury MN 55125

Title or Position CITY STATE ZIP CODE

Telephone number 651 - 800 - 6939

201806070200430321

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

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.

US BANK

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

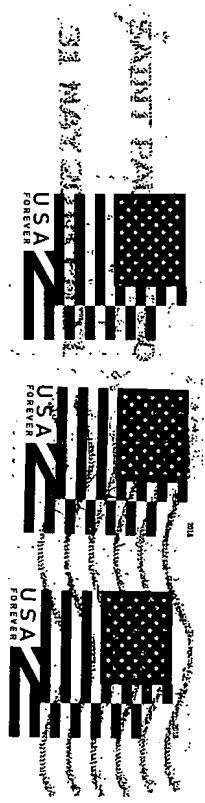
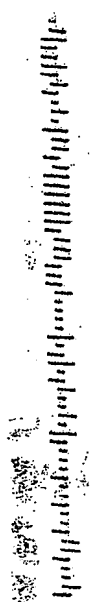
201806070200430322

Bev
25511
Paul, MN
55125

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Federal Election Commission
1050 First Street NE
Washington DC
20463

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United States Senate

OFFICE OF THE SECRETARY

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THE PRECEDING DOCUMENT WAS:

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Postmark

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USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

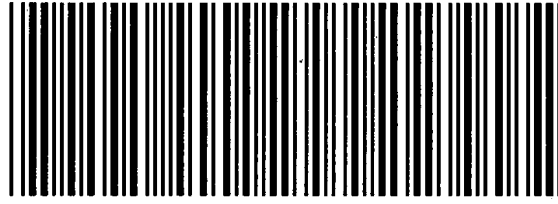
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FAX _____
Date of Receipt

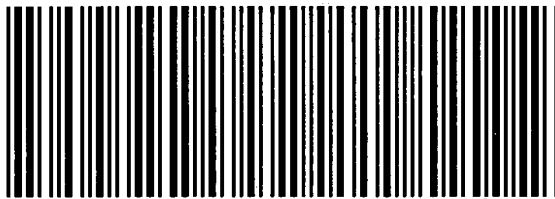
OTHER _____
Date of Receipt or Postmark

PREPARER BP DATE PREPARED 6/6/18

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