

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

Democratic Party of Kewaunee County

ADDRESS (number and street) N2734 St. Peters Rd
 (Check if address is changed)
Kewaunee WI 54213
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS
 (Check if address is changed) DPofKC2020@gmail.com
Optional Second E-Mail Address
garykrzysiak@hotmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)
 (Check if address is changed) Kewaunee.wiscdems.com

2. DATE 07 / 15 / 2020

3. FEC IDENTIFICATION NUMBER C C00752493

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 Krzysiak, Laura, Lee, Mrs.,

Signature of Treasurer Krzysiak, Laura, Lee, Mrs., [Electronically Filed] Date 07 / 22 / 2020

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

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 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 SUB (National, State or subordinate) committee of the dem (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 _____

Write or Type Committee Name

Democratic Party of Kewaunee County

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

DEMOCRATIC PARTY OF WISCONSIN

Mailing Address 15 N. PINCKNEY ST.
 SUITE 200
 MADISON WI 53703
 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 Krzysiak, Laura, Lee, Mrs.,
 Mailing Address 408 N Park Rd
 Algoma WI 54201
 CITY STATE ZIP CODE
 Title or Position
 Treasurer Telephone number 920 493 4445

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 Krzysiak, Laura, Lee, Mrs.,
 Mailing Address 408 N Park Rd
 Algoma WI 54201
 CITY STATE ZIP CODE
 Title or Position
 Treasurer Telephone number 920 493 4445

Full Name of Designated Agent

Dobbins, Mary, Ellen, Mrs.,

Mailing Address

N2734 St. Peters Rd

Kewaunee

WI

54216

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

920

338

4178

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.

Bank of Luxemburg

Mailing Address

630 Main St

P.O., Box 440

Luxemburg

WI

54217

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE