24038610584

# FEC FORM 1

# STATEMENT OF ORGANIZATION

FEC MAIL CENTER
2004 NOV -2 A 9:20
Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FR4M5

Nilkelson for Congress

ADDRESS (number and street) Box 960

(Check if address is changed)

Lake Crystal MN 56055-

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

-

2. DATE 10 27 2004

3. FEC IDENTIFICATION NUMBER ▶ C

4. IS THIS STATEMENT NEW (N) OR X 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 Clark Fredric Kuon

Signature of Treasurer Date 10 27 2004

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
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

FE3AR04.PDF

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: GREGORY DENNIS NIKKELSON

Candidate Party Affiliation: IND

Office Sought: ✓ House Senate President

State: MN

District: 01

(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.

6. Name of Any Connected Organization or Affiliated Committee

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: McKelvey for Congress

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: Kari Kim Gustafson

Mailing Address: 5298 221st LN

LAKE CRYSTAL | MN | 56055-

CITY ▲ | STATE ▲ | ZIP CODE ▲

Title or Position ▼: Assistant Treasurer

Telephone number: 507-947-3493

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: CLARK NEAL FREDRICKSON

Mailing Address: 312 W Welcome Ave

MANKATO | MN | 56001-

CITY ▲ | STATE ▲ | ZIP CODE ▲

Title or Position ▼: Treasurer

Telephone number: 507-386-1903

Full Name of Designated Agent: Kari Kim Gustafson

Mailing Address: 5298 221st LN

Lake Crystal | MN | 56055-

CITY ▲ | STATE ▲ | ZIP CODE ▲

Title or Position ▼: Assistant Treasurer

Telephone number: 507-947-3493

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.

Wells Fargo Bank

Mailing Address P.O. E. Hickory, P.O. Box 168

Marks MS 38646-0168

CITY ▲ STATE ▲ ZIP CODE ▲

[redacted]

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

24038610588

Federal Election Commission

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JMS
PREPARER

11-2-04
DATE PREPARED

(5/2004)