

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
MAIL ROOM

|                                                                                      |  |                                                                                                           |
|--------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------|
| 1. (a) NAME OF COMMITTEE IN FULL<br><b>United States Republican Committee (USRC)</b> |  | DATE<br><b>7/2/96</b>                                                                                     |
| (b) Mailing and Street Address<br><b>3220 N Street N.W. #276</b>                     |  | 2. FEE IDENTIFICATION NUMBER<br><b>C00305464</b>                                                          |
| (c) City, State and ZIP Code<br><b>Washington, D.C. 20007</b>                        |  | 3. IS THIS STATEMENT AN AMENDMENT?<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |

## 5. TYPE OF COMMITTEE (Check one)

- ☐ (a) This committee is a primary campaign committee. (Complete the candidate information below.)
- ☐ (b) This committee is to instruct nominees, and is NOT a party committee. (Describe the committee's purpose below.)
- |                   |                             |               |                |
|-------------------|-----------------------------|---------------|----------------|
| Name of Candidate | Secretary Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
- ☐ (c) This committee supports/opposes only one candidate, \_\_\_\_\_ and is NOT an authorized committee. (name of candidate)
- ☐ (d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ party. (National, State or subcommittee) (Democratic, Republican, etc.)
- ☐ (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 a party committee.

| Name of Any Connected Organization or Affiliated Committee | Mailing Address and ZIP Code | Relationship |
|------------------------------------------------------------|------------------------------|--------------|
| None                                                       |                              |              |

### Type of Connected Organization

☐ Corporation ☐ Corporation with Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Corporation

- ☒ 7. Custodian of Records: Identify by name, address (street number — optional) and position of the person in possession of campaign books and records.

| Full Name | Mailing Address | Title or Position |
|-----------|-----------------|-------------------|
|-----------|-----------------|-------------------|

|                    |                                          |           |
|--------------------|------------------------------------------|-----------|
| Timothy B. Schmidt | 2501 WAYZATA BLVD, MINNEAPOLIS, MN 55405 | Treasurer |
|--------------------|------------------------------------------|-----------|

- ☒ 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 | Mailing Address | Title or Position |
|-----------|-----------------|-------------------|
|-----------|-----------------|-------------------|

|                    |                                          |  |
|--------------------|------------------------------------------|--|
| Timothy B. Schmidt | 2501 WAYZATA BLVD, MINNEAPOLIS, MN 55405 |  |
|--------------------|------------------------------------------|--|

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, holds safety deposit boxes or maintains funds.

| Name of Bank, Depository, etc. | Mailing Address and ZIP Code |
|--------------------------------|------------------------------|
|--------------------------------|------------------------------|

|                |                                         |
|----------------|-----------------------------------------|
| Northwest Bank | 900 E Wayzata Blvd<br>Wayzata, MN 55391 |
|----------------|-----------------------------------------|

I certify that I have executed this statement and to the best of my knowledge and belief it is true, correct and complete.

|                                                              |                                                     |                       |
|--------------------------------------------------------------|-----------------------------------------------------|-----------------------|
| TYPE OR PRINT NAME OF TREASURER<br><b>Timothy B. Schmidt</b> | SIGNATURE OF TREASURER<br><i>Timothy B. Schmidt</i> | DATE<br><b>7/2/96</b> |
|--------------------------------------------------------------|-----------------------------------------------------|-----------------------|

NOTE: Submission of false, inaccurate, or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. § 4362. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

|                                                                                                                 |  |  |  |                              |
|-----------------------------------------------------------------------------------------------------------------|--|--|--|------------------------------|
| For further information contact:<br>Federal Election Commission<br>Toll-free 800-424-9630<br>Local 202-576-3120 |  |  |  | FEC FORM 1<br>(revised 4/87) |
|-----------------------------------------------------------------------------------------------------------------|--|--|--|------------------------------|

**Federal Election Commission**  
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*kes*  
PREPARER

7-20-96  
DATE PREPARED