RECEIVED IFEC MAIL CENTER

STATEMENT OF 2007 JUL 31 PN 12: 06 **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 **COMMITTEE** (in full) is changed) over the lines. 5 <sub>1</sub>3 <sub>1</sub> ADDRESS (number and street) (Check if address is changed) lo ci CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS wwill liams @paco, ut.com, COMMITTEE'S WEB PAGE ADDRESS (URL) COMMITTEE'S FAX NUMBER 3,0,1,= 8 5,6,= 0,6 3,3 DATE C FEC IDENTIFICATION NUMBER ▶ 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. Wade S. Williams Type or Print Name of Treasurer Signature of Treasurer Date 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)
FE3AN042.PI	DF			

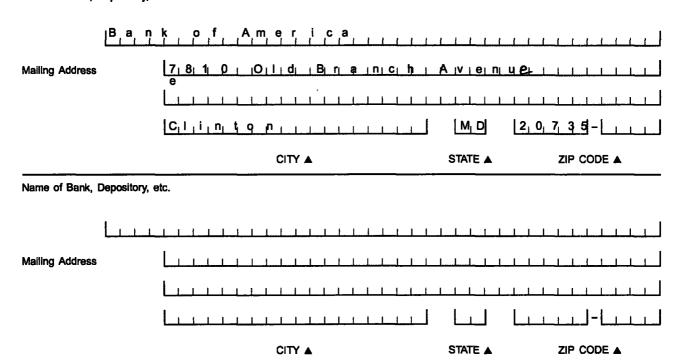
FEC Form 1 (Revised 02/2	2003)				Page 2
5. TYPE OF COMMITTEE (Check	k One)			-	
(a) This committee is	s a principal campa	aign committee. (Com	nplete the candida	te information belo	w.)
(b) This committee is information below		mmittee, and is NOT	a principal campa	aign committee. (Co	omplete the candidate
Name of Candidate	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<del></del>		
Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
(c) This committee s	supports/opposes o	only one candidate, ar	nd is NOT an auth	norized committee.	
Name of Candidate					
(d) This committee is	s a	(National, State or subordinate)	committee of the		(Democratic, Republican, etc.) Party.
(e) This committee is	s a separate segre	gated fund.			
(f) X This committee s committee.	supports/opposes in	nore than one Federa	l candidate, and is	s NOT a separate	segregated fund or party
6. Name of Any Connected Orga	nization or Affilia	nted Committee	<u>.</u>		<u> </u>
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		CITY A		STATE A	ZIP CODE A
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Type of Connected Organization	<b>:</b>				
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Membership Organizatio	. Find	Trade Association		Cooperative	9
<u> </u>					

			i				
FEC Form 1 (Revised	02/2003)		Page 3				
Write or Type Committee Nam	<b>ne</b>						
The Mesabi Fund  Custodian of Records: Ide	entify by name, address (phone number	ontional) and position of the p	erson in possession of committee				
books and records.	, , , , , , , , , , , , , , , , , , ,	opional, and position of the pr	or definition				
Full Name PAC	ρ <sub>ι</sub> μ <sub>ι</sub> t <sub>ι</sub> s <sub>ι</sub> ομ <sub>ι</sub> r <sub>ι</sub> c <sub>ι</sub> i <sub>ι</sub> η	g L L C					
Mailing Address	7 9 1 5 1 0 1 d Bir	<u>lainicihi i Aveini</u>	ulelliii				
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Title or Position♥	CITY ▲	STATE ▲	ZIP CODE ▲				
Aldum ilmi su t	ria tioiri i i i i i	Telephone number: 3	0,1-85,6-0770				
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  Wade, William, s.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Mailing Address P <sub>A</sub> C, P <sub>U</sub> ut <sub>s</sub> ομις in g <sub>L</sub> L <sub>L</sub> C,							
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	The Mesabi Fund  Custodian of Records: Ide books and records.  Full Name  Mailing Address  Title or Position▼  Ald mil ni si t  Treasurer: List the name a any designated agent (e.g., Full Name of Treasurer  Mailing Address  Title or Position▼  Full Name of Designated Agent  Mailing Address  Title or Position▼  Full Name of Designated L a t Agent  Mailing Address	Custodian of Records: Identify by name, address (phone number books and records.  Full Name	The Mesabi Fund  Custodian of Records: Identify by name, address (phone number – optional) and position of the probooks and records.  Full Name  PiA C P U t S P U C i n B I L C  CITY A STATE A  All dirth int is t ria tight treasurer.  Full Name  Of Treasurer: List the name and address (phone number – optional) of the treasurer of the committee any designated agent (e.g., assistant treasurer).  Full Name  Of Treasurer  Wade Willing Address  PA C P U t S P I P D L C  CITY A STATE A  CITY A STATE A  Full Name  Of Treasurer  Wade N I I I A B M S  CITY A STATE A  Full Name  Of Treasurer  Wade N I I I A B M S  CITY A STATE A  Full Name of Designated Agent  Agent  Mailing Address  PA C P U t S P I P D L C I N M D  Title or Position▼  CITY A STATE A  STATE A  Full Name of Designated Agent  Agent  Mailing Address  PA C P U t S P I C I N S I A P P I  Title or Position▼  CITY A STATE A  STATE A  STATE A  STATE A  Title or Position▼  CITY A STATE A  STATE A  STATE A  STATE A  STATE A				

Page 4

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.



PREPARER

(3/2005)

## **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. Date of Receipt Hand Delivered **Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked USPS Express Mail Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED



RECEIVED FEC MAIL CENTER

207 JUL 31 PM 3: 29 July 24, 2007

Federal Election Commission Reports Analysis Division 999 E Street, N.W. Washington, D.C. 20463 Attn: Jennifer Thangavelu

COPY

RE: Amended Statement of Organization

Please find the enclosed amended Statement of Organization for U.S. Cellular Political Action Committee. Our identification number is C00336057. The amended Statement of Organization includes the change to our committee's name, the addition of our email address and the change of our appointed Treasurer and Assistant Treasurer. The appointment of myself, Thomas S. Weber was in effect during the period of time referenced in the attached letter.

Please accept the amended Statement of Organization and let us know if you require any additional information or have any questions. Our Custodian of Records, Mark Krohse, can be contacted directly at (773) 399-8912.

Sincerely,

Thomas S. Weber

Thomas J. Weller

U.S. Cellular Political Action Committee

Treasurer

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2007 JUL 31 PM 3: 29

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(Check if address									
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COMMITTEE'S E-MA	AIL ADDRESS		C	ITY 🛦	•	STATE A	:	ZIP CODE A	
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2. DATE 0	7 24	′ 200°							
B. FEC IDENTIFIC	CATION NUM	BER >	C 0	0 3 3	6 0 57				
1. IS THIS STATEM	MENT :	NEW (N)	OR	257	AMENDED (A)				
certify that I have e	examined this	Statement a	nd to the best o	of my knowle	edge and belief it	is true, co	rrect and com	plete.	
Type or Print Name of	of Treasurer	Tho	omas S.	Weber				<del></del>	
	<del>- y</del>	hamia	J. Wil	Æ		į.	กัก / ซึ่ง	A 7 7 7 7	7/7/7/7/5 107
Signature of Treasure	ir	- 00 00		1	<del></del>	Date :	Comment Agences	man harriba	- Section of
NOTE: Submission of I	-	•		•	e person signing ( BE REPORTED W		•	ies of 2 U.S.C	;. §437g.
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Only E3AN042,PDF					ee 800-424-9530 202-694-1100		(Rev	ised 02/2003)	



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_	FEC Form 1 (Revised	02/2003)			Pa	ge 3
7	Write or Type Committee Nam	ne				
	U.S. Cellular	Political Action Co	mmittee			
7.	Custodian of Records: Ide books and records.	entify by name, address (phone number	~ optional) and position	of the perso	on in possession	of committee
	Full Name Mark	Krohse	<del></del>	ليلطب		لىسى
	Mailing Address	8410 W. Bryn Mawr A	venue			لللللل
			<del></del>	لسلسلسل	<del></del>	لحبيب
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	Title or Position▼	CITY ▲	ST	ATE A	ZIP CO	DE 🛦
	Assistant Cont	roller	Telephone number	773	399	8900
8.	Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) o assistant treasurer).	f the treasurer of the co	mmittee; an	d the name and	address of
	Full Name Thoma	s S. Weber	<del></del>		<del>-                                      </del>	
	Mailing Address	8410 W. Bryn Mawr A	venue, , , ,			لحجيب
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	Title or Position▼	CITY ▲	ST	ATE A	ZIP CO	DE 🛦
	Treasurer		Telephone number	773	399	8900
	Full Name of Designated Agent John	C.,Gockley, , , , , ,	<u> </u>		11111	
	Mailing Address	8410 W. Bryn Mawr A	venue			
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	Title or Position▼	CITY ▲	ST	ATE A	ZIP CO	DE 🛦
	Assistant Trea	asurer	Telephone number	773	399	8900 





June 29, 2007

James Zander, Treasurer
United States Cellular Corporation
Political Action Committee
8410 W Bryn Mawr, Ste. 700
Chicago, IL 60631

Response Due Date: July 30, 2007

Identification Number: C00336057

Reference:

Amended Mid-Year Report (1/1/05-6/30/05), received 4/28/06, Year End Report (7/1/05-12/31/05), April Quarterly Report (1/1/06-3/31/06), July Quarterly Report (4/1/06-6/30/06), October Quarterly Report (7/1/06-9/30/06), 12 Day Pre-General Report (10/1/06-10/18/06), 30 Day Post-General Report (10/19/06-11/27/06), and Year End Report (11/28/06/12/21/06)

(11/28/06-12/31/06)

Dear Mr. Zander:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. An adequate response must be received at the Commission by the response date noted above. An itemization of the information needed follows:

-Your report(s) was not signed by the treasurer or designated agent listed on your Statement of Organization. Please amend your report(s) by providing the signature of an individual that is authorized to sign the report(s). 2 U.S.C. §434(a)(1) and 11 CFR §104.14(a) and (d) If a new treasurer has been appointed, please file an amended Statement of Organization (FORM 1) or a letter (if not an electronic filer) to reflect this change.

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. Requests for extensions of time in which to respond will not be considered. Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.



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Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1143.

Sincerely,

Jennifer Thangavelu

Senior Campaign Finance Analyst

Reports Analysis Division



(3/2005)

## **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. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark Shipping Date UPS Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER DATE PREPARED