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Office

Use

Only

FEC	
FORM	1

SECRETARY OF THE SE PUBLIC RECORDS

STATEMENT OF 2018 FEB 23 AM 11: 46 **ORGANIZATION** Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. LEONARD, FOR MINNESPIT ADDRESS (number and street) (Check if address is changed) ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address is changed) Optional Second E-Mail Address INICK LRONGYD COMMITTEE'S WEB PAGE ADDRESS (URL) CKLEONARD FOR SENATE. COM (Check if address is changed) 02 15 20.18 DATE FEC IDENTIFICATION NUMBER ▶ 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 Date Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

FEC FORM 1

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-604-1100

5.			OMMITTEE Committee:
	(a)	X	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 Cand		NICK LEUMARD
	Cand Party	idate Affiliatio	on DFL Office Sought: House Senate President District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi		
	Part	y Com	mittee:
	(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
	Polit	ical A	ction 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	Fundi	raising 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
		رب	committees/organizations, none of which is an authorized committee of a federal candidate.
		Comn	nittees Participating in Joint Fundraiser
		1.	FEC ID number C
		2.	FEC ID number C
		3.	FEC ID number
		4.	FEC ID number

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	пе	. ,
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	p PAC Sponsor
Mailing Address		
	CITY STATE Z	IP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
 Custodian of Records: Ide books and records. 	entify by name, address (phone number optional) and position of the person in posse	ession of committee
Full Name T,V,L	asure, T	
Mailing Address		
Title or Position	CITY STATE ZI	P CODE
	Telephone number	
8. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	e and address of
Full Name Of Treasurer	W LEONARD MASON	
Mailing Address	RO BOX 2441	
	EJIMA STATE ZII	2
Title or Position TIREAS MRE :	Telephone number (6,172) - 15,7	2-727

CITY

Page 4

ZIP CODE

STATE

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent

Mailing Address

FEC	Form	15	(Hevisea	02/20

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	_	
Page	 of	

5(g)	or(h). Joint Fundraisi n	g Participant:			
	1	 <u> </u>	FEC II	O number	C
	2.		 FEC II	O number	
	3.		FEC II	O number	C
	4.		FEC II) number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joi	nt Fundraising Rep	presentative	e, or Leadership PAC Sponsor
			1111		
	Mailing Address	L			
	Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Joint Fundraising	g Representa	tive Leadership PAC Sponsor
8.		by name, address (phone number - op	tional)		1
	Full Name				
	Mailing Address				1 1 1 1 1 1 1 1 1
		<u> </u>			
	TITLE OR POSITION	▼ CITY ▲	;	STATE A	ZIP CODE ▲
			Telephone N	umber	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories i intains funds.	n which the commit	tee deposits	s funds, holds accounts, rents
	•				
	Mailing Address				

N CENTURY STATES SILVER SILVER MANAGER SILVER MANAG

WINNEAFOLIS WIN 353

17 FEB 2018 PM

Minneapolis MN55410

Office of Public Records PO. Box 77578 Screened by CASI Screened by Office / Senate Post Office FEB 7.7 2018

Washington DC 20013



DANA K. MACCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232

United States Senate

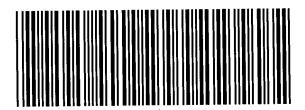
OFFICE OF THE SECRETARY

WASHINGTION, DC 20510-7116
PHONE(202) 224-0322

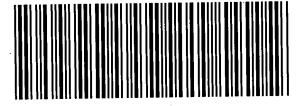
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVEREDDate of Receipt
USPS FIRST CLASS MAIL 2/23/18 2/47/18 Date of Receipt Postmark
USPS REGISTERED/CERTIFIED
USPS PRIORITY MAIL
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL
USPS EXPRESS MAIL Postmark
OVERNIGHT DELIVERY SERVICE: SHIPPING DATE NEXT BUSINESS DAY DELIVERY
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PREPARER DATE PREPARED 23/18



SEN PATCH



SEN PATCH