Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Chad Enstad for Congress 3322 410th Street ADDRESS (number and street) (Check if address is changed) Campbell 56522 MN CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS chadme74@gmail.com (Check if address is changed) Optional Second E-Mail Address ∣iaj5023@pşu,edu COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00674630 FEC IDENTIFICATION NUMBER > 3. X 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. Jensen, Danielle, Lynn,, Type or Print Name of Treasurer Jensen, Danielle, Lynn,, [Electronically Filed] 03 28 2018 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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		rm 1 (Revised 02/2009)	Page 2			
		E OF COMMITTEE didate 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.)				
	ne of didate	Enstad, Chad, Lee, ,				
	didate y Affiliati	on IDP Office Sought: * House Senate President	State MN District 07			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	ne of didate					
Par	ty Con	y Committee:				
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Pol	itical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected 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 pacommittee. (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.)				
Joir	nt Fund	Iraising Representative:				
(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to	vo or more political			
(h)		committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.					
	3.					
	4.	FEC ID number C				

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Write or Type Committee Nar		30 -
Chad Enstad f		
	Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
NONE		
	<u> </u>	
Mailing Address		
Walling Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Represen	ntative Leadership PAC Sponsor
 Custodian of Records: Id books and records. 	dentify by name, address (phone number optional) and position of the	person in possession of committee
Jensen,	Danielle, Lynn, ,	
Mailing Address	208 Heider Street	
ag . taa. eee	PO Box 124	
	Foxhome	56543
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	218 517 0772
B. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee assistant treasurer).	e; and the name and address of
Full Name Jensen, of Treasurer	Danielle, Lynn, ,	
Mailing Address	208 Heider Street	
	PO Box 124	
	Foxhome MN	56543
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	218 - 517 - 0772

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Full Name of Designated Agent	Jensen, Isaac, , ,					
Mailing Address	208 Heider Street					
	PO BOX 124					
	Foxhome MN 56543 CITY STATE ZI	P CODE				
Title or Position Campaign Mana	nger	7 0010				
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.						
	Bell Bank					
Mailing Address	205 West Washington Ave					
	Fergus Falls MN 56537					
	CITY STATE ZI	P CODE				
Name of Bank, D	Depository, etc.					
Mailing Address						
	CITY STATE ZI	P CODE				