FEC FORM 1

## STATEMENT OF **ORGANIZATION**

RECEIVED 2014 JAN 15 . 6M 10

						Office Use Only Affill: N2
NAME OF COMMITTEE (in full)		(Check if name is changed)		mple:If typing, type the lines.	12FE4M5	CHAIL CENTER
DIVITITER FOR	p R	ESILIDIEM.	$\tau_{\perp\perp}$			
<u> </u>					1.1.1.1.1.	
ADDRESS (number and street)	82	4 HARD	ING	<u> </u>		
☐ ◀ (Check if address is changed)	ســا			<del></del>	<u> </u>	
		EARFILIS,	<u>H</u> , ,	<del></del>	STATE A	7,7,8,3]- ZIP CODE A
COMMITTEE'S E-MAIL ADDRES	SS .				-	
(Check if address is changed)	/ N	FO. CO. U.T.	TER	FORPRESI	DENTIL	om
		al Second E-Mail A				
COMMITTEE'S WEB PAGE ADD	DRESS (	URL)				
☐ <b>(</b> Check if address is changed)	ww	WIBUITI	ERF	DIRPRIESTID	ENT.16	M
	lii					
2. DATE 01 0	2 6	2014				
3. FEC IDENTIFICATION NU	JMBER	► C	o B	E ACOLURO		
4. IS THIS STATEMENT	NE'	W (N) OR		AMENDED (A)	·	
I certify that I have examined th	is Stater	nent and to the be	st of my	knowledge and belief it	is true, correct a	nd complete.
Type or Print Name of Treasure	, <u>T</u> i	ROY TROM	LETTA			
	-//				· · · · · · · · · · · · · · · · · · ·	
Signature of Treasurer	_	11/00			Date 0, 1	07 7.0.1.4
NOTE: Submission of false, errone			_	oject the person signing t		e penalties of 2 U.S.C. §437g.
Office Use Only			•	For further information of Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	•	FEC FORM 1 (Revised 06/2012)

	۲	EC FO	rm 1 (Hevised 02/2009) Page 2
5.			OMMITTEE
	Cano	*********	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 Candi		MARK JOSEPH DUTTER
	Candi Party	date Affiliatio	on District State  Office Sought: House Senate President  District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi		
	Party	v Con	nmittee:
	(d)		(National, State (Democratic, or subordinate) committee of the Republican, etc.) Party.
	Polit	ical A	ction Committee (PAC):
	(e) <sub>.</sub>		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
	٠		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	Fund	Iraising 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 committees/organizations, none of which is an authorized committee of a federal candidate.
		Com	mittees Participating in Joint Fundraiser
		1	
		2.	FEC ID number
	, •	3.	FEC ID number
		4.	

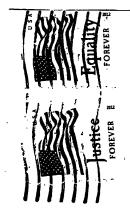
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Write or Type Committee Nam	ne .				
DUTTER FOR	PRESIDENT				·
6. Name of Any Connected	Organization, Affiliated	d Committee, Join	t Fundraising Rep	resentative,	or Leadership PAC Sponso
			<u> </u>	<u> </u>	
Mailing Address					
·					
		CITY		STATE	ZIP CODE
Relationship: Connecte	ed Organization Affili	ated Committee	Joint Fundraisin	g Representat	tive Leadership PAC Spo
Mercaria	ilmania .	Eb			Courses
. Custodian of Records: Ide	entify by name, address	(phone number	optional) and posi	tion of the pe	erson in possession of comm
books and records.					
Full Name TRO	4 TROMBE	TTA		·.	
		•			
Mailing Address	18	<u> </u>	<u>911  9</u>	· ici los	
	RAPID C	174		SD	57793
Title or Position		CITY		STATE	ZIP CODE
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TREASURFR	, 1		Telephone nu	mber <u>(</u>	5.71-B-17.0
	nd address (phone num		·		and the name and address
Treasurer: List the name at any designated agent (e.g.,  Eull Name	nd address (phone num	ber optional) of	·		
Treasurer: List the name at any designated agent (e.g.,  Full Name	nd address (phone num assistant treasurer).	ber optional) of	the treasurer of th		
3. Treasurer: List the name at any designated agent (e.g., Full Name of Treasurer	nd address (phone numi assistant treasurer).	ber optional) of	the treasurer of th	e committee;	
3. Treasurer: List the name at any designated agent (e.g., Full Name of Treasurer	nd address (phone numi assistant treasurer).  Y TROMBE	ber optional) of	the treasurer of th	e committee;	and the name and address
Treasurer: List the name at any designated agent (e.g., Full Name of Treasurer	nd address (phone numi assistant treasurer).  Y TROMBE	ber optional) of	the treasurer of th	e committee;	

FEC Form 1 (Revised 027/2009)

ZIP CODE

WISI BANK Mailing Address |Q| CITY STATE ZIP CODE Name of Bank, Depository, etc. Mailing Address ZIP CODE CITY . STATE



## RECEIVED 2014 JAN 15 AM 10: 01 FEC MAIL CENTER

FOGUR ELECTION COMMISSION 999 G STREET NW WASHINGTON, DC 20463



PREPARER (8/2013)

## **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 Postmarked **USPS Priority Mail Express** 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):