Chad Lee For Congress, Inc.

P.O. Box 236, Mt. Horeb, WI 53562

March 15, 2012

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

To whom it may concern,

Please accept this letter as my official resignation as Treasurer for Chad Lee For Congress, Inc. effective March 15, 2012. The committee's FEC identification number for this campaign is C00513226.

If you have any questions regarding this notice please contact me on my cell phone at 608-279-8386 or by email at smontanio@yahoo.com.

Regards,

Shawn Montanio

12030760813

FEC FORM 1

STATEMENT OF **ORGANIZATION**

2012 MAR 22 PM 1:11

			ONTICEUSE PAIN !!				
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5				
Chad Lee for Congress, Fine							
ADDRESS (number and street)	P. a. Box	123611111					
(Check if address							
is changed)	Mt Hories		WI 53572-				
		CITY	STATE ZIP CODE				
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one e	e-mail address)					
(Check if address	linforachias	aller for come	3 reis 5 - 100m 1 1 1				
is changed)	1 1 1 1 1 1 1 1 1						
COMMITTEE'S WEB PAGE ADI							
(Check if address is changed)							
2. DATE 03 / 2 2 2 12							
3. FEC IDENTIFICATION NUMBER COSS 13226							
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)					
I certify that I have examined th	nis Statement and to the bes	st of my knowledge and belief	it is true, correct and complete.				
Type or Print Name of Treasure	NATHANIEL	- A JOHNS	_∞ ~				
Signature of Treasurer	lullu		Date 03 15 2012				
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 Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100					

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FEO F	offil 1 (Neviseu 02/2009)						
TYPE OF	COMMITTEE						
Qendidate 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 of Candidate	Chadilee						
Candidate Party Affilia	tion $2 < \rho$ Office Sought: Y House Senate President District 0.2						
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate							
Party Co	mmittee:						
(d)	This committee is a (National, State (Democratic, Republican, etc.) Party.						
Political	Action Committee (PAC):						
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:						
	Corporation Wo 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 Fur	draising 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.						
00	respitte en Paulinia alima in Joint Francisco						
	mmittees Participating in Joint Fundraiser						
1.	FEC ID number C						
2.	FEC ID number C						
3.	FEC ID number C						
4.							

FEC Form 1 (Revised	d 02/2009) Page 3
Write or Type Committee Nam	me
6. Name of Any Connected	l Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
<u> </u>	<u> </u>
Mailing Address	
	CITY STATE ZIP CODE
Relationship: Connec	ted OrganizationAffiliated CommitteeJoint Fundraising RepresentativeLeadership PAC Sponso
ia na 1990-bis	Name VIII
Custodian of Records: Id	dentify by name, address (phone number optional) and position of the person in possession of committee
books and records.	
V.ha	2) Lee
Mailing Address	403 Ourtschi Drive
	Mt. Hores VI 53572-
Title or Position	CITY STATE ZIP CODE
ı	Telephone number 608-630-236
	Telephone number 600 - 650 - 456
Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the name and address of ., assistant treasurer).
Full Name of Treasurer	HANTEL JOHNSOM
Mailing Address	[1,0,9, S, FO,0,2T, H, ST.]
	MONNT HOREB WE SSSFULL
	CITY STATE ZIP CODE
Title or Position	Telephone number 608-437-003
111716141314171611	Telephone number book - 43 + - 0 0 4

[FEC Form	n 1 (Revised 02/2009)	Page 4			
12030760816	Full Name of Designated Agent					
	Mailing Address					
		CITY STATE ZIP CO	DDE			
	Title or Position	Telephone number				
	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.					
		anahor Bank				
	Mailing Address	18819 Bus 181 Bind 11511 Fest 1111				
			1 1 1			
		Kit ittorneibili WI 513572	-[
		CITY STATE ZIP CO	ODE			
	Name of Bank, Depository, etc.					
	Mailing Address		1111			

CITY

STATE

ZIP CODE

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):