

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Juneau County Democratic Party

ADDRESS (number and street)

215 E State St

(Check if address is changed)

Mauston

CITY ▲

WI

STATE ▲

53948

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

McGinleyJohnR@gmail.com

Optional Second E-Mail Address

radantle@hotmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

jcodems.org

2. DATE

01 / 01 / 2010

3. FEC IDENTIFICATION NUMBER ▶

C C00891499

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.

Type or Print Name of Treasurer McGinley, John, Roger, ,

Signature of Treasurer McGinley, John, Roger, ,

Date

10 / 21 / 2024

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.

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For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

5. TYPE OF COMMITTEE:

Candidate 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.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a SUB (National, State or subordinate) committee of the DEM (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 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.)
- (g) This committee is an independent expenditure-only political committee (Super PAC).
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).
 - In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

- (i) 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.
- (j) 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.

Committees Participating in Joint Fundraiser

1. _____

2. _____

C _____

C _____

Write or Type Committee Name

Juneau County Democratic Party

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

DEMOCRATIC PARTY OF WISCONSIN FEDERAL

Mailing Address

15 N. PINCKNEY ST

SUITE 200

MADISON

WI

53703

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Organization

Joint Fundraising Representative

Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

McGinley, John, Roger, ,

Mailing Address

321 W State

Mauston

WI

53948

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Co-treasurer

Telephone number

608

547

9768

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 of Treasurer

McGinley, John, Roger, ,

Mailing Address

321 W State

Mauston

WI

53948

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Co-treasurer

Telephone number

608

547

9768

Full Name of Designated Agent

Zindorf, Chris, , ,

Mailing Address

105 Western Ave

Elroy

WI

53913

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Co-treasurer

Telephone number

608

572

2826

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.

Oakdale Credit Union

Mailing Address

904 W State St

Mauston

WI

53948

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1N

Transaction ID :

Double checking date of our organization as a polical committee.

Form/Schedule:

Transaction ID: