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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Timothy Pawlenty			2. Candidate's FEC Identification Number		
(b) Address (number and street) <input type="checkbox"/> Check if address changed One Financial Plaza, 120 South Sixth Street, 9th Floor					
(c) City, State, and ZIP Code Minneapolis, MN 55402			3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REP		5. Office Sought President		6. State & District of Candidate	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)
Pawlenty for President Exploratory Committee

(b) Address (number and street)
One Financial Plaza, 120 South Sixth Street, 9th Floor

(c) City, State, and ZIP Code
Minneapolis, MN 55402

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate



Date

03/18/2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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Received from House Records & Registration Office

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Other (Specify):

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PREPARER

3/21/11
DATE PREPARED

(3/2005)

1103058582

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)

☐ (Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Pawlenty for President Exploratory Committee

ADDRESS (number and street)

One Financial Plaza, 120 South Sixth Street, 9th Floor

☐ (Check if address
is changed)

Minneapolis

MN

55402

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

info@timpawlenty.com

☐ (Check if address
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.timpawlenty.com

☐ (Check if address
is changed)

2. DATE

03 / 18 / 2011

3. FEC IDENTIFICATION NUMBER

C

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 Mark Kennedy

Signature of Treasurer

Mark Kennedy

Date

03 / 18 / 2011

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

FEC FORM 1
(Revised 02/2009)

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 Timothy Pawlenty

Candidate Party Affiliation REP 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 ☐ (National, State or subordinate) committee of the ☐ (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.)

Joint Fundraising 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.

Committees Participating in Joint Fundraiser

1.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/>
2.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/>
3.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/>
4.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/>

1102050001

Write or Type Committee Name

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ 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

Gregg Peterson

Mailing Address

One Financial Plaza, 120 South Sixth Street, 9th Floor

Minneapolis

MN

55402

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

Telephone number

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

Mark Kennedy

Mailing Address

One Financial Plaza, 120 South Sixth Street, 9th Floor

Minneapolis

MN

55402

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

11030533696

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PREPARER

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