



**STATE POLITICAL PARTY CONVENTION STATEMENT**  
 SECRETARY OF STATE  
 SFN 58715 (12-2007)

Secretary of State  
 State of North Dakota  
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 JAN 29 2010  
 SEC. OF STATE

SEE REVERSE SIDE FOR REPORTING REQUIREMENTS AND INSTRUCTIONS

Campaign contribution reporting provisions are found in North Dakota Century Code, Chapter 16.1-08.1.

**PLEASE PRINT**

**Section A**

Name of state party North Dakota Republican Party			
State party address (street address or post office box) PO Box 1917	City Bismarck	State ND	Zip Code 58502
Name of person completing this report Beverly Clayburgh		Daytime Telephone # 701-255-0030	

**Section B**

TYPE OF REPORT	STATE CONVENTION DATE	REPORT DUE DATE	REPORT COVERS
<input type="checkbox"/> POST CONVENTION STATEMENT	March 20/21, 2010	Due sixty days after close of the state nominating convention	January 1 through thirty days after the close of the state nominating convention
<input checked="" type="checkbox"/> YEAR END STATEMENT		January 31 each year	Entire calendar year
<input type="checkbox"/> AMENDED (also mark applicable report being amended above)			

**Section C**

Cash on hand in fund on January 1	\$ None
Cash on hand in fund at end of reporting period	\$ 2,790.54
Gross total of all revenue received in excess of \$200	\$ 3,000.00
Gross total of all revenue received of \$200 or less	\$ None
Gross total of all expenditures made in excess of \$200	\$ None
Gross total of all expenditures made of \$200 or less	\$ 209.46

**Section D**

Net gain transferred to state party fund (see instructions on back)	\$ _____
Net loss covered by state party fund (see instructions on back)	\$ _____

**Section E**

I, Beverly Clayburgh, certify that I have examined this Campaign Contribution Statement, including any attached addenda for filing with this statement, and to the best of my knowledge and belief it is true, correct and complete.

Print name of person completing this report

Beverly Clayburgh Signature of person completing this report

1/28/10 Date

**SCHEDULE # 1 - Revenue Received In Excess of \$200 and under \$5,000**

Attach additional pages if necessary. Please print.

No reportable Revenue for reporting period.

NAME	ADDRESS	AGGREGATE TOTAL OF REVENUE	DATE OF MOST RECENT RECEIPT OF REVENUE MONTH/DAY/YEAR
<b>EXAMPLE</b> DOE, JOHN or ABC CORPORATION	100 1ST AVENUE BISMARCK ND 58501	\$ 250	03/15/08
Purpose(s) of revenue received: REGISTRATION FEES, BOOTH RENTAL, ADVERTISING			

	NAME (last name, first name)	ADDRESS	AGGREGATE TOTAL OF REVENUE	DATE OF MOST RECENT RECEIPT OF REVENUE MONTH/DAY/YEAR
1	ND Republican Party	PO Box 1917 Bismarck, ND 58502	\$ 3,000	10/28/09
Purpose(s) of revenue received:				
2		Seed money for State Republican convention to be held in Grand Forks	\$	
Purpose(s) of revenue received:				
3			\$	
Purpose(s) of revenue received:				
4			\$	
Purpose(s) of revenue received:				
5			\$	
Purpose(s) of revenue received:				
6			\$	
Purpose(s) of revenue received:				
7			\$	
Purpose(s) of revenue received:				
8			\$	
Purpose(s) of revenue received:				
9			\$	
Purpose(s) of revenue received:				