**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. AG AMERICA PO Box 3479 ADDRESS (number and street) (Check if address is changed) Glen Allen 23058 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS margee.clancy@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00567560 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Erica Ann Sechrist Type or Print Name of Treasurer Erica Ann Sechrist [Electronically Filed] 04 15 2016 Signature of Treasurer Date 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

Political Action Committee (PAC):  (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is Corporation Corporation Not 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 paracommittee. (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. FEC ID number C  2. FEC ID number C  3. FEC ID number C	ı	FEC <b>Fo</b> i	rm 1 (Revised 02/2009)	Page <b>2</b>			
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)  Name of Candidate Party Affiliation				-			
Name of Candidate  Candidate Party Affiliation  This committee supports/opposes only one candidate, and is NOT an authorized committee.  Name of Candidate  Party Committee:  ((a) This committee is a	(a)		This committee is a principal campaign committee. (Complete the candidate information below	.)			
Candidate Party Affiliation  This committee supports/opposes only one candidate, and is NOT an authorized committee.  Name of Candidate  Party Committee: (d) This committee is a	(b)						
Party Affiliation							
Name of Candidate  Party Committee:  (d) This committee is a '(National, State or subordinate) committee of the Republican, etc.) Part Political Action Committee (PAC):  (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is Corporation Corporation Corporation New Capital Stock Labor Organization 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 part 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.  Committees Participating in Joint Fundraiser  1.   FEC ID number C   3.   FEC ID number C   3.   FEC ID number C   4.   FEC ID number C   4.   FEC ID number C   5.   FEC ID number C   6.   FEC ID number C   7.   FE							
Party Committee:  (d) This committee is a	(c)						
(d) This committee is a							
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Corporation	Poli	tical A	ction Committee (PAC):				
Membership Organization	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a			
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2. FEC ID number C  3. FEC ID number C							
3. FEC ID number C			FEC ID number				
/		4.					

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FEC Form 1 (Revised 0 Write or Type Committee Name		Page 3
AG AMERICA		
	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	in PAC Sponsor
	rganization, Anniated Committee, South Fairding Representative, or Leadersh	ip i Ao Sponsoi
NONE		
Mailing Address		
	CITY STATE 2	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
. Custodian of Records: Identi books and records.	tify by name, address (phone number optional) and position of the person in poss	session of committee
MARGEE (	CLANCY	ı
Full Name	PO Box 3479	
Mailing Address		
	Glen Allen , VA , 23058	
Title or Position	CITY STATE Z	ZIP CODE
Custodian of Records	Telephone number	
Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the nan ssistant treasurer).	ne and address of
Full Name Erica Ann S	Sechrist	
of Treasurer	2000 Stokes Lane	
Mailing Address		
	Nashville	
		IP CODE
Title or Position Treasurer	Telephone number	

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Full Name of Designated	MARGEE CLANCY					
Agent						
Mailing Address	PO Box 3479					
	Glen Allen VA 23058					
	CITY STATE	ZIP CODE				
Title or Position Assistant Treasu	urer 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.  WELLS FARGO BANK						
Mailing Address	PO BOX 6995					
	<u> </u>	<u> </u>				
	PORTLAND OR 97228					
	CITY STATE	ZIP CODE				
Name of Bank, [	Depository, etc.					
Mailing Address						
	CITY STATE	ZIP CODE				