Image# 11972772069 PAGE 1 / 5

FEC FORM 1		STATE								(Office (Jse O	nlv			
NAME OF COMMITTEE (in	ı full)	(Check if is changed			le:If typ e lines.		ре	12	FE41	_			illy			
PANHAND	LE PE	ANUT GF	ROWE	ERS	PAC) 										
ADDRESS (number a	nd street)	PO BOX 361														
(Check if ac																
is changed)		WELLINGTON						L ^{TX}			9095			·		
			С	SITY				STAT	ΓE			ZIP	СО	DE		
COMMITTEE'S E-MA	AL ADDRES	S (Please provide o , dnixon@mwmlaw	-	nail addre	ess)											
X (Check if																
is change	a)															
COMMITTEE'S WEB	PAGE ADD	RESS (URL)														
(Check if																Ш
is change	d)															
2. DATE 12	2 27	2011]													
3. FEC IDENTIFIC	CATION NUI	MBER	C cod	0382507												
4. IS THIS STATE	MENT	NEW (N)	OR	X	AME	NDED	(A)									
I certify that I have e	examined this	Statement and to	the best o	of my kno	wledge	and be	elief it	is true	e, corr	ect ar	nd coi	nplet	e.			
Type or Print Name	of Treasurer	Rusty Strickland														
Signature of Treasure	Rusty Str	ickland		[E	Electroni	cally Fi	led]	Date	М	12	/ D	27	1	Y Y	2011	• Y
NOTE: Submission of		us, or incomplete in					-				e pena	alties	of 2	U.S.	C. §4	l37g.

	Office Use		For further information contact: Federal Election Commission Tell Free 200 424 0520	FEC FORM 1
<u> </u>	Only		Toll Free 800-424-9530 Local 202-694-1100	(Revised 02/2009)

ı	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	i aye Z
Can	didate	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. (Con information below.)	nplete the candidate
Name Cand	e of lidate		
	lidate Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Parl	ty Con	nmittee:	(5
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization X 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 scommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	ne	
PANHANDLE I	PEANUT GROWERS PAC	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersl	hip PAC Sponsor
PANHANDLE PEANL	JT GROWERS PAC	
Mailing Address	PO BOX 361	
Ÿ	WELLINGTON TX 79095	
	CITY STATE	ZIP CODE
Relationship: X Connected	ed Organization Affiliated Committee Joint Fundraising Representative Lea	adership PAC Sponsor
 Custodian of Records: Idea books and records. 	entify by name, address (phone number optional) and position of the person in pos	session of committee
Full Name Mailing Address	PO Box 361	
	Wellington TX 79095	
Title or Position	CITY STATE	ZIP CODE
Bookkeeper		447 - 2394
8. Treasurer: List the name at any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nar assistant treasurer).	me and address of
Full Name Rusty Stri	ickland	
Mailing Address	1806 Ellison St.	
	Wellington TX 79095 CITY STATE	ZIP CODE
Title or Position		447 0440

Telephone number

FEC Form 1 (Revis	sed 02/2009)		Page 4
Full Name of Designated Agent Karen C	Coleman		
Mailing Address	PO Box 361		
	Wellington CITY	STATE	2095 ZIP CODE
Title or Position Assistant Treasurer	Teleph	one number 806	447 2394
Banks or Other Deposito safety deposit boxes or m	ories: List all banks or other depositories in which the	committee deposits funds	, holds accounts, rents
Name of Bank, Depository			
Wellin	ngton State Bank		
Mailing Address	P.O. Box 1032		
	Wellington	TX	0095
	CITY	STATE	ZIP CODE
Name of Bank, Depository	, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Karen Coleman Full Name PO Box 361 Mailing Address Wellington ΤX 79095 Title or Position CITY # **STATE** ZIP CODE Custodian of Records 806 447 2394 Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number