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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Independent Community Bankers of America Political Action Committee 1615 L Street, NW ADDRESS (number and street) Suite 900 (Check if address is changed) Washington 20036 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS icbpac@icba.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00032698 FEC IDENTIFICATION NUMBER 3. X 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. Merski, Paul, , Mr., Type or Print Name of Treasurer Merski, Paul, , Mr., [Electronically Filed] 01 2020 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 Only

Local 202-694-1100

ı	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE c 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. (Cominformation below.)	plete the candidate
Nam Cano	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of didate		
Par	ty Con	nmittee: (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is
		Corporation Wo 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 secommittee. (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	Iraising Representative:	
(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to	wo or more political
(h)		committees/organizations, at least one of which is an authorized committee of a federal candidate. 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.		
	2.		
	3.	FEC ID number	
	4.		

Γ			\neg
FEC Form 1 (Revised (02/2009)	Page 3	
Write or Type Committee Name			
Independent Co	mmunity Bankers of America Po	olitical Action Committ	tee
6. Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraising Rep	resentative, or Leadership PAC Sponso	r
Independent Commun	ity Bankers of America		
Mailing Address	1615 L Street, NW		
J	Suite 900		
	Washington	DC 20036	
	CITY	STATE ZIP CODE	
-			
Relationship: x Connected	I Organization Affiliated Committee Joint Fundraising	g Representative Leadership PAC Spo	onsor
books and records. Dashner, Note: Full Name Mailing Address	1615 L Street Suite 900 Washington	DC 20036	
Title or Position	CITY	STATE ZIP CODE	
Custodian of Records		mber 202 - 659 - 811	1
8. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the issistant treasurer).	e committee; and the name and address	of
Full Name Merski, Pa of Treasurer	ul, , Mr.,		
Mailing Address	1615 L Street, NW		
	Suite 900		
	Washington	DC 20036 - I	
Title or Position		000 050 044	

Telephone number

FEC Form	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Stetter, Aaron, , ,	
Mailing Address	1615 L St NW	
	Suite 900	
	Washington DC 20036	-
	CITY STATE ZIP C	CODE
Title or Position Assistant Treas	urer	
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, holds accordance or maintains funds.	ounts, rents
Name of Bank, [Depository, etc.	
	Minnesota National Bank	
Mailing Address	PO Box 306	
	131 12th St S.	
	Sauk Centre MN 56378	
	CITY STATE ZIP (CODE
Name of Bank, [Depository, etc.	
	United Bank	
Mailing Address	1776 K St NW	
	Washington DC 20006	
	CITY STATE ZIP (CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

afety deposit boxes or ma	ies: List all banks	or other depositories in w	Telephone Num		funds, holds accounts, rents
Banks or Other Depositor cafety deposit boxes or many Name of Bank, Depository, etc.	ies: List all banks dintains funds.	or other depositories in w			funds, holds accounts, rents
Banks or Other Depositor cafety deposit boxes or many Name of Bank, Depository, etc.	ies: List all banks dintains funds.	or other depositories in w			funds, holds accounts, rents
Banks or Other Depositor afety deposit boxes or ma	ies: List all banks of intains funds.	or other depositories in w			funds, holds accounts, rents
Banks or Other Depositor afety deposit boxes or ma	ies: List all banks of intains funds.	or other depositories in whether depositories in which is a second control of the second			funds, holds accounts, rents
		or other depositories in w			funds, holds accounts, rents
TITLE OR POSITION	· 		Telephone Nui	mber	
TITLE OR POSITION	•				1 1 1
	▼	CITY ▲	S	TATE ▲	ZIP CODE ▲
Mailing Address					
Full Name					
Designated Agent: Identify	by name, address	(phone number – optiona))		
Connected	Organization x	Affiliated Committee	Joint Fundraising	Representat	ive Leadership PAC Spo
Relationship:		CITY A		STATE A	ZIP CODE ▲
	Baton Rouge			LA	70808
Mailing Address	5555 Bankers Ave	enue			
Name of Any Connected Louisiana Bankers	=	ated Committee, Joint F	ındraising Repr	esentative,	or Leadership PAC Spons
4.			FEC ID	number	С
S			ا FEC ID		С
3.			FEC ID		C
1			FEC ID		

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.			
		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	C
-	Organization, Affiliated Committee, Joint Fun ers Association of Ohio Federal PA	• .	•
Mailing Address	1060 Kingsmill Parkway		
Mailing Address			
	Columbus	, OH ,	43229
Dolotionobine			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲ ative Leadership PAC Sp
Full Name			
Mailing Address	1		
Mailing Address			
Mailing Address			
Mailing Address	CITY	STATE	7IP CODE A
Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	V	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION Sanks or Other Depositor afety deposit boxes or ma	ies: List all banks or other depositories in which	Telephone Number	
TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mail arme of Bank, depository, etc.	ies: List all banks or other depositories in which	Telephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundrais i	3		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
•	d Organization, Affiliated Committee, Joint Fundr Kers Association of Illinois FED PAC	raising Representative	e, or Leadership PAC Spor
Mailing Address	901 Community Drive		
	Springfield		62703
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC S
	fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Ident		Fundraising Represent	ative Leadership PAC S
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Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or name of Bank,	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Spon
Independent Ban	kers Association of Texas (IBAT FED	PAC)	
Mailing Address	1700 Rio Grande Street		
	Suite 100		
	Austin	TX	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC S
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Represent	
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftety deposit boxes or m ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY Te	STATE A lephone Number	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftety deposit boxes or m ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY Te	STATE A lephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.	. [FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
		Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
	diana BANKPAC	, reaerai runa 		
	Mailing Address	6925 Parkdale Place		
	Maining / Idanoso			
		Indianapolis	, , IN ,	46254
	Relationship:	CITY ▲	STATE A	ZIP CODE A
	Connected	Organization X Affiliated Committee Joint F	Fundraising Representa	ative Leadership PAC Sponsor
		by name, address (phone number - optional)		
	gnated Agent: Identify	by name, address (phone number – optional)		
F		by name, address (phone number – optional)		
F	ull Name	by name, address (phone number – optional)		
F	ull Name	by name, address (phone number – optional)		
F	ull Name	CITY	STATE A	ZIP CODE A
F	full Name	CITY A	STATE A	
F	full Name	CITY A	1	
- - - 	Full Name	CITY CITY Tele ies: List all banks or other depositories in which the	ephone Number	ZIP CODE A
P. Bank safety	Full Name	CITY CITY Tele ies: List all banks or other depositories in which the	ephone Number	ZIP CODE A
P. Bank safety	Full Name	CITY CITY Tele ies: List all banks or other depositories in which the	ephone Number	ZIP CODE A
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P. Bank safety	Full Name	CITY CITY Tele ies: List all banks or other depositories in which the	ephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
		Organization, Affiliated Committee, Joint Fundra	ising Representati	ve, or Leadership PAC Sponsor
Ma	assachusetts Ba	nkers PAC		
		73 TREMONT STREET 3RD FLOOR		
l	Mailing Address			
		DOCTOR		00400
		BOSTON	MA	02108
l	Relationship:	CITY A	STATE A	ZIP CODE A
Design	nated Agent: Identify	by name, address (phone number – optional)		
Fu	ıll Name	by name, address (phone number – optional)		
Fu		by name, address (phone number – optional)		
Fu	ıll Name	by name, address (phone number – optional)		
Fu	ıll Name	by name, address (phone number – optional)		
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