PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Iowa Renewable Fuels Association PAC - IRFA PAC 5505 NW 88th St ADDRESS (number and street) Suite 100 (Check if address is changed) **Johnston** 50131 IΑ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mshaw@iowarfa.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 30 2018 C00438978 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. Sanchez, Valerie, , , Type or Print Name of Treasurer Sanchez, Valerie, , , [Electronically Filed] 07 30 2018 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

FEC Fo !	orm 1 (Revised 02/2009) Page 2			
TYPE OF C	COMMITTEE e 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				
Candidate Party Affiliation	ion Office State I House Senate President District			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Com	nmittee: (National, State (Democratic,			
(d)	This committee is a or subordinate) committee of the Republican, etc.) Pa			
Political A	Action Committee (PAC):			
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr				
	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 segreg 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 Fund	draising 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.			
_	nmittees Participating in Joint Fundraiser			
Com				
Com	FEC ID number			
1.	FEC ID number			

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FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam		
		\ C
	le Fuels Association PAC - IRFA PA	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representation	e, or Leadership PAC Sponsor
Iowa Renewable Fue	ls Association	
Mailing Address	5505 NW 88th Street	
agaa. eee	Suite 100	
	Johnston	50131
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Represen	ntative Leadership PAC Sponsor
 Custodian of Records: Ide books and records. 	entify by name, address (phone number optional) and position of the	person in possession of committee
	, Valerie, , ,	
Full Name	,5505 NW 88th Street	
Mailing Address		
	Johnston IA	50131
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	515 - 252 - 6249
8. Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committed assistant treasurer).	ee; and the name and address of
Full Name Haack, D	aryl, , ,	
of Treasurer		
Mailing Address	5505 NW 88th Street	
	Johnston IA	50131
	CITY STATE	ZIP CODE
Title or Position Treasurer		515 252 6249

Telephone number

FEC Form	1 (Revised 02/2009)	Page 4			
Full Name of Designated Agent	Sanchez, Valerie, , ,	<u> </u>			
Mailing Address	5505 NW 88th Street				
	Johnston IA 50131 CITY STATE ZI	P CODE			
Title or Position Assistant Treasu	rer 515 25	2 6249			
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.					
	Bankers Trust				
Mailing Address	3905 Merle Hay Road				
	Des Moines IA 50310				
	CITY STATE Z	IP CODE			
Name of Bank, D	Depository, etc.				
Mailing Address					
	CITY STATE ZI	IP CODE			