Image# 201912059166158115			_	PAGE 1/4
FEC FORM 1	STATEMEI ORGANIZ	_	Of	fice Use Only
1. NAME OF	(Check if name	Example:If typing, type	12FE4M5	
COMMITTEE (in full)	is changed)	over the lines.		
National Agricultu	ural Aviation Ass	ociation Ag-Av F	PAC	
	1440 Duke Street			
ADDRESS (number and street)				
(Check if address is changed)				
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE				
 (Check if address is changed) 	tlong@agaviation.org			
,	Optional Second E-Mail Ad			
	ftaylor@agaviation.c	rg		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 04 / 1				
3. FEC IDENTIFICATION N	JMBER ► C c	00341701		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined th	nis Statement and to the best	of my knowledge and belief i	t is true, correct and	complete.
	Liele Dentis Mi			
Type or Print Name of Treasure	r Hale, Randy, , Mr., 			
Signature of Treasurer	Randy, , Mr.,	[Electronically Filed]	Date 12	05 / Y Y Y Y 2019
NOTE: Submission of false, erron		may subject the person signing ON SHOULD BE REPORTED \		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYPE OF COMMITTEE													
Candidate Committee:	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. (Comp information below.)	plete the candidate												
Name of Candidate													
Candidate Office Party Affiliation Office Sought: House Senate President	State												
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.													
Name of Candidate Image: Candidate <th< td=""><td></td></th<>													
Party Committee:													
	Democratic, Republican, etc.) Party												
Political Action Committee (PAC):													
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	nected organization is												
Corporation Corporation w/o Capital Stock	Labor Organization												
Membership Organization	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 seg committee. (i.e., nonconnected committee)	gregated 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.)													
Joint Fundraising Representative:													
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political												
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political												
Committees Participating in Joint Fundraiser													
1 FEC ID number C													
2 FEC ID number C													
3 FEC ID number C													
4 FEC ID number C													

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Write or Type Committee Name

National Agricultural Aviation Association Ag-Av PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

	lational Agricultural A				
	Mailing Address	1005 E Street SE			
	Maining Address				
		Washington		DC 20003	3
		CITY		STATE	
		Organization Affiliated Committe	-		Leadership PAC Sponsor
7.	Custodian of Records: Iden books and records.	tify by name, address (phone numbe	er optional) and pos	ition of the person in	possession of committee
	Full Name				
	Mailing Address				
	Title or Position	CITY		STATE	ZIP CODE
	Title or Position	CITY	Telephone nu		
8.		I address (phone number optional	·	imber	
8.	Treasurer: List the name and	l address (phone number optional ssistant treasurer).	·	imber	
8.	Treasurer: List the name and any designated agent (e.g., a Full Name Hale, Rand	l address (phone number optional ssistant treasurer).	·	imber	
8.	Treasurer: List the name and any designated agent (e.g., a Full Name Hale, Rand of Treasurer	I address (phone number optional ssistant treasurer). y, , Mr.,	·	imber	
8.	Treasurer: List the name and any designated agent (e.g., a Full Name Hale, Rand of Treasurer Mailing Address	I address (phone number optional ssistant treasurer). y, , Mr.,	·	imber	name and address of
8.	Treasurer: List the name and any designated agent (e.g., a Full Name Hale, Rand of Treasurer	I address (phone number optional sistant treasurer). y, , Mr., 5138 Co. Rd. 44 Hobstown	·	Imber - Ine committee; and the Ine committee; and the	name and address of

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FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																			1								
Mailing Address																											
																L				L					L		
							CI	TΥ								ST	ATE					ZI	P (DE		
Title or Position																											
											Tele	eph	one	e n	um	ber		L			 - [_						

9. 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.
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Wells F	Fargo Bank		
Mailing Address	215 Pennsylvania Avenue SE		
	Washington	DC 20003	
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE