FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	(See instruction	Office use only							
NAME OF COMMITTEE (in fi	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5						
Western United	I Dairymen Political Action Com	mittee							
ADDRESS (number and st	reet) 1315 K Street								
(Check if addre									
(Check if addre is changed)	Modesto		CA 95354 _	—— Ш					
		CITY	STATE▲ ZIP CODE ▲						
COMMITTEE'S E-MAIL   Iluis@westernu	. ADDRESS Initeddairymen.com			ı					
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			Щ					
				1					
1				I					
COMMITTEE'S FAX N	IMPED								
2095270630	JIMBEN								
2. DATE 0.3	7 21 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
3. FEC IDENTIFICATION NUMBER C C00186072									
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)									
I certify that I have examin	ed this Statement and to the best of my know	wledge and belief it is true, correct a	and complete						
Type or Print Name of T	reasurer Justin Gioletti								
Signature of Treasurer	Electronically Filed by Justin Gio	letti	Date 03 / 21 / Y Y	9 0 °C					
NOTE: Submission of fals	e, erroneous, or incomplete information may	subject the person signing this Sta	•						
Office Use Only FE3AN042.PDF		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100							

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5.	TYPE OF COMMITTEE (Check One	)								
	(a) This committee is a p	orincipal 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	Office Sought: House Senate	President	State District						
	(c) This committee support	orts/opposes only one candidate, and is NOT an authoria	zed committee.							
	Name of Candidate									
		(National, State (or subordinate) committee of the eparate segregated fund ents/opposes more than one Federal candidate, and is N	e Rep	nocratic, ublican,etc.) Party. d or party						
6.	Name of Any Connected Organiza	tion or Affiliated Committee								
	Western United Dairymen Pol	itical Action Committee								
L	1   1   1   1   1   1   1   1   1   1	<u> </u>								
	Mailing Address	1315 K Street								
	L									
	L	Modesto	[ <b>CA</b> ] 953	54   _ [						
		СІТУ▲	STATE A Z	IP CODE A						
	Relationship									
	Type of Connected Organization:									
	Corporation	Corporation w/o Capital Stock	Labor Organization	n						
	Membership Organization	X Trade Association	Cooperative							

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Write or Type Committee Name

	Western United D	Pairymen Political Action Committee												
7.	<b>Custodian of Records:</b> Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.													
	Full Name	Michael Marsh												
	Mailing Address	1708 Edgebrook Drive												
		Modesto		95354 _										
	Title or Position ♥	CITY A	STATE <b>▲</b>	ZIP CODE A										
	C.E.	0.	Telephone number	9 527 6453										
8.	name and address	name and address (phone number optiona of any designated agent (e.g., assistant treas	I) of the treasurer of the couurer).	nmittee; and the										
	Full Name of Treasurer	Justin Gioletti												
	Mailing Address	10413 W. Main Street												
		Turlock		95380 9306										
	Title or Position ♥	CITY A	STATE <b>▲</b>	ZIP CODE A										
	Trea	asurer	Telephone number	9 527 6453										
	Full Name of Designated Agent													
	Mailing Address													
	Title or Position ▼	CITY A	STATE A	ZIP CODE A										
			Telephone number											

9. <b>Banks or Other Depositories:</b> List all banks or other depositories in which the committee deposits funds, holds accounts, rer safety deposit boxes or maintains funds.								, rents									
	Name of Bank, Dep	ository, etc.															
Bank of America																	
	Mailing Address		1601 I St	reet													
			Modesto								CA	L		95354	<b>1</b>		
	CITY 🗖							STATE <b>△</b>				ZIP CODE 🛕					
	Name of Bank, Dep	ository, etc.															
	Mailing Address																
												L					
			CITY 🗻					STATE <b>△</b> ZIP CODE <b>△</b>									