10/28/2005 08 : 29

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

Rain and Hail Insurance Society Political Action Committee

ADDRESS (number and street)

9200 Northpark Drive

(Check if address is changed)

Suite 300

Johnston | IA | 50131 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

Not Applicable

COMMITTEE'S WEB PAGE ADDRESS (URL)

Not Applicable

COMMITTEE'S FAX NUMBER

5155591001

2. DATE M M D D Y Y Y Y 10 28 2005

3. **FEC IDENTIFICATION NUMBER** C C00279505

4. IS THIS STATEMENT X 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

Type or Print Name of Treasurer Ryan Miller

Signature of Treasurer Electronically Filed by Ryan Miller Date M M D D Y Y Y Y 10 28 2005

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 Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

5. TYPE OF COMMITTEE (Check One)

(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

Office Sought: House Senate President

State District

(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican,etc.) Party.

(e) X This committee is a separate segregated fund

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Rain and Hail Insurance Society

Mailing Address 9200 Northpark Drive

Suite 300

Johnston IA 50131 -

CITY STATE ZIP CODE

Relationship Connected

Type of Connected Organization:

Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization X Trade Association Cooperative

Write or Type Committee Name

Rain and Hail Insurance Society Political Action Committee

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name: Nancy Burrier

Mailing Address: 435 N.E. Pinehurst Circle

Ankeny | IA | 50021 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Assistant Secretary

Telephone number: 515 – 559 – 1000

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: Ryan Miller

Mailing Address: 3417 Eula Drive

Urbandale | IA | 50322 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer

Telephone number: 515 – 559 – 1000

Full Name of Designated Agent: Jerry Kincade

Mailing Address: P.O. Box 254

Winterset | IA | 50273 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Assistant Treasurer

Telephone number: 515 – 559 – 1100

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.

West Des Moines State Bank

Mailing Address

P.O. Box 65020

West Des Moines IA 50265 - 0020

CITY STATE ZIP CODE