Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. West Virginia Bankers Association PAC 3601 MacCorkle Avenue, SE ADDRESS (number and street) (Check if address Suite 100 is changed) Charleston 25304 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS mmangano@wvbankers.org (Check if address is changed) Optional Second E-Mail Address bwitt@wvbankers.org COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.wvbankers.org (Check if address is changed) DATE 31 2023 C00450072 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. Mangano, Mark, , , Type or Print Name of Treasurer Mangano, Mark, , , [Electronically Filed] Date 2023 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

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|---|--|----------------------------|--|--|--|
| | TYPE OF COMMITTEE: | | | | |
| | Candidate 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 information below.) | the candidate | | | |
| | 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 | | | | |
| | Party Committee: | | | | |
| | (d) This committee is a (National, State or subordinate) committee of the Republic | ratic, ran, etc.) Party | | | |
| | Political Action Committee (PAC): | | | | |
| | (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.) | ected organization is a: | | | |
| | Corporation Corporation w/o Capital Stock Labor | r Organization | | | |
| | Membership Organization X Trade Association Coop | perative | | | |
| | In addition, this committee is a Lobbyist/Registrant PAC. | | | | |
| (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or 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.) | | | | |
| | (g) This committee is an independent expenditure-only political committee (Super PAC). | | | | |
| | In addition, this committee is a Lobbyist/Registrant PAC. | | | | |
| | (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid | PAC). | | | |
| | In addition, this committee is a Lobbyist/Registrant PAC. | | | | |
| | Joint Fundraising Representative: | | | | |
| | (i) 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 | | | |
| | (j) 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 | | | | |
| | 1C | | | | |
| | C | | | | |

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|----|--|---|-----------------------------------|--|--|
| ۷ | Vrite or Type Committee I | Name | | | |
| | | ia Bankers Association PAC | | | |
| 6. | Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor | | | | |
| | vvest virginia Ba | ankers Association | | | |
| | | | | | |
| | | | | | |
| | Mailing Address | 3601 MacCorkle Avenue, SE | | | |
| | | Suite 100 | | | |
| | | Charleston W | V 25304 | | |
| | | | | | |
| | _ | | TE ▲ ZIP CODE ▲ | | |
| | Relationship: X Conn | nected Organization Affiliated Organization Joint Fundraising Rep | resentative Leadership PAC Spons | | |
| | | | | | |
| 7. | Custodian of Records: | : Identify by name, address (phone number optional) and position of the | person in possession of committee | | |
| | books and records. | | | | |
| | Mang | gano, Mark, , , | | | |
| | Full Name | | | | |
| | Mailing Address | 3601 MacCorkle Avenue, SE | | | |
| | | Suite 100 | | | |
| | | Charlestown | V 25304 | | |
| | | | | | |
| | Tale on Decition | CITY ▲ STA | TE ▲ ZIP CODE ▲ | | |
| | Title or Position ▼ | | | | |
| | CEO | Telephone number | 304 - 343 - 8038 | | |
| | | | | | |
| 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 Mang | gano, Mark, , , | | | |
| | of Treasurer | | | | |
| | Mailing Address | 3601 MacCorkle Avenue, SE | | | |
| | 5 | Suite 100 | | | |
| | | Charlestown | /V ₁ 25304 | | |
| | | | | | |
| | Tille as De iii | CITY ▲ STA | TE ▲ ZIP CODE ▲ | | |
| | Title or Position ▼ | | | | |

Telephone number

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|---|---------------------------|---------------|--|--|--|
| Full Name of Designated Agent | | | | | |
| Mailing Address | | | | | |
| | | | | | |
| | | | | | |
| Title or Position ▼ | CITY ▲ STATE ▲ | ZIP CODE ▲ | | | |
| | Telephone number | | | | |
| 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. | | | | | |
| | Summit Community Bank | | | | |
| Mailing Address | 310 North Main Street | | | | |
| | | | | | |
| | Moorefield | 26836 | | | |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ | | | |
| Name of Bank, Depository, etc. | | | | | |
| | City National Bank | | | | |
| Mailing Address | 3601 MacCorkle Avenue, SE | | | | |
| | | | | | |
| | Charleston | 25304 | | | |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ | | | |

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

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| y) or (h). Joint Fundraisin | p Participant: | | |
|--|---|----------------------------|--------------------------------|
| 1. | , | FEC ID number | C |
| 2. | | FEC ID number | C |
| 3. | | FEC ID number | C |
| 4. | | FEC ID number | C |
| | | | |
| Name of Any Connected | Organization, Affiliated Committee, Joint Fur | draising Representative | e, or Leadership PAC Sponsor |
| American Bankers | Association (BankPAC) | | |
| | | | |
| | | | |
| Mailing Address | 1333 New Hampshire Avenue, NW | | |
| | Suite 700 | | |
| | Washington | DC | 20036 |
| Relationship: | CITY A | STATE ▲ | ZIP CODE ▲ |
| Connected | Organization X Affiliated Committee Jo | int Fundraising Representa | ative Leadership PAC Sponsor |
| Pull Name | by name, address (phone number – optional) | 1 1 1 1 1 1 1 1 | |
| Mailing Address | | | |
| | | | |
| | | 1 1 . 1 | 1 |
| TITLE OR POSITION | _ CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| TITLE OR POSITION | , | Telephone Number | |
| | | | |
| Banks or Other Depositor safety deposit boxes or ma | ies: List all banks or other depositories in whice intains funds. | ch the committee deposit | s funds, holds accounts, rents |
| | | | |
| Name of Bank, FNB Bar Depository, etc. | ank, Inc. | | |
| Mailing Address | 105 N High Street | | |
| | | <u> </u> | <u> </u> |
| | Romney | WV | 26757 |
| | CITY ▲ | STATE ▲ | ZIP CODE ▲ |