Only

STATEMENT OF

PAGE 1 / 4

FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Rural Pac 7900 E. Union, Suite 200 ADDRESS (number and street) (Check if address is changed) Denver 80237 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS swestphal@fusainsurance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 02 2019 C00478743 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. Westphal, Shelley, R,, Type or Print Name of Treasurer Westphal, Shelley, R,, [Electronically Filed] 80 02 2019 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

Local 202-694-1100

FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE OF C	OMMITTEE 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. (Corinformation below.)	nplete the candidate
Name of Candidate		
Candidate 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		
Party Con	nmittee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Political A	ction Committee (PAC):	
(e) x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is
	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 s committee. (i.e., nonconnected committee)	egregated 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 Fund	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committee collects contributions.	wo 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	

FEC Form 1 (Revised		Page 3
Write or Type Committee Name	e	
Rural Pac		
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
Farmers Educational 8	& Cooperative Union of America Rocky Mtn Division	
Mailing Address	7900 E Union Ave, Suite 200	
	Denver CO 802 CITY STATE	37
Relationship: x Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Idea books and records. 	entify by name, address (phone number optional) and position of the person in	n possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
3. Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	e name and address of
Full Name Westphal, of Treasurer	, Shelley, R, ,	
Mailing Address	7900 Union Ave suite 200	
	Denver CO 802 CITY STATE	37 ZIP CODE
Title or Position Assistant Treasurer	Telephone number 303	- 283 - 3542

FEC FOR	m 1 (Payisad 0.2/2000)	Dogo A
	m 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
Banks or Other safety deposit be Name of Bank, I	BOK Financial	
Mailing Address	PO Box 5945	
Mailing Address	PO Box 5945	
Mailing Address		80217
Mailing Address		80217 ZIP CODE
Mailing Address Name of Bank, I	Denver CITY STATE	
	Denver CITY STATE	ZIP CODE
	Denver CO 8 CITY STATE Depository, etc.	ZIP CODE
Name of Bank, I	Denver CO 8 CITY STATE Depository, etc.	ZIP CODE
Name of Bank, I	Denver CO 8 CITY STATE Depository, etc.	ZIP CODE