# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 16 8 33 AM '99

1. (a) NAME OF COMMITTEE IN FULL: ☒ (Check if name is changed)
PENNSYLVANIA FOODPAC (PA FOOD MERCHANTS ASSN)
PA FOODPAC (PA CONVENIENCE STORE COUNCIL)

2. DATE: July 14, 1999

(b) Number and Street Address: 1029 NUMMA RD ☐ (Check if address is changed)

3. FEC Identification Number: C00345660

(c) City, State and ZIP Code: WORMLEYSBURG, PA 17043

4. Is This Report An Amendment? ☒ YES ☐ NO

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 | State/District |
|---|---|---|---|
| | | | |

☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)

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

☒ (e) 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 a party committee.

| 6. Name of Any Connected Organization or Affiliated Committee | Mailing Address and ZIP Code | Relationship |
|---|---|---|
| PA FOOD MERCHANTS ASSOC. (PFMA) | P.O. BOX 870, CAMP HILL, PA 17001-0870 | connected |
| PA CONVENIENCE STORE COUNCIL (PCSC) | P.O. BOX 870, CAMP HILL, PA 17001-0870 | CONNECTED |

Type of Connected Organization
☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☒ Trade Association ☐ Cooperative

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 | Mailing Address | Title or Position |
|---|---|---|
| William R. Tannehill | P.O. Box 870, Camp Hill, PA 17001-0870 | Ass't Treasurer |

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 | Mailing Address | Title or Position |
|---|---|---|
| David L. McCorkle | P.O. Box 870, Camp Hill, PA 17001-0870 | Treasurer |
| William R. Tannehill | P.O. Box 870, Camp Hill, PA 17001-0870 | Ass't Treasurer |

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. | Mailing Address and ZIP Code |
|---|---|
| Dauphin Deposit Bank | Market St., Harrisburg, PA 17101 |

*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 | SIGNATURE OF TREASURER | DATE |
|---|---|---|
| David L. McCorkle | David L. McCorkle | July 14, 1999 |

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.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-219-3420

FE6AN121

**FEC FORM 1**
(revised 4/97)

Federal Election Commission

# ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

| | | |
|---|---|---|
| ☐ | Hand Delivered | Date of Receipt |
| ☐ | First Class Mail | POSTMARKED |
| ☑ | Registered/Certified Mail | POSTMARKED 7-14-99 |
| ☐ | No Postmark | |
| ☐ | Postmark Illegible | |
| ☐ | Received from the House office of Records and Registration | Date of Receipt |
| ☐ | Received from the Senate Office of Public Records | Date of Receipt |
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| ☐ | Electronic Filing | |

| | |
|---|---|
| PREPARER | 7-18-99 DATE PREPARED |

(4/98)