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**FEC** 

Only

STATEMENT OF
ORGANIZATION

FORM 1		RGANIZA	ATION		
. • • • • • •		(See instructior	ns)		Office use only
1. NAME OF COMMITTEE (ii	n full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
	FOR/ADV OF SE	COTTON (CASC)	SOUTHERN COTTONG	ROWERS INC/SE	• <b>co-</b>
ADDRESS (number an	d street)	Prominence Cou	ırt 		
(Check if addre	ss Ste.	110			
is changed)		sonville		GA	30534
			CITY	STATE▲	ZIP CODE 🔺
COMMITTEE'S E-M	AIL ADDRESS (Please	e provide only one e-r	mail address)		
(Check if addre	ss davie	d@southern-sou	itheastern;susan@south	ern-southeaster	n.org
is changed)					
COMMITTEE'S WE	3 PAGE ADDRESS (U	RL)			
(Check if addre	ss				
is changed)					
2. DATE <b>0</b>	M / D D / Y 3 20	2009 <sup>°</sup>			
3. FEC IDENTIFIC	ATION NUMBER		C C00300426		
			0 00000420		
4. IS THIS STATE	MENT X NEW	/ (N) <b>OR</b>	AMENDED (A)		
I certify that I have exar	nined this Statement and	to the best of my know	wledge and belief it is true, correc	t and complete	
		Mr. David Ruppe	niekor		
Type or Print Name of	of Treasurer				
Signature of Treasure	er Electronically File	d by Mr. David	Ruppenicker	Date <b>0</b> 3	<sup>/ D</sup> 20 <sup>/</sup> 2009
NOTE: Submission of			v subject the person signing this S		
Office Use			For further information		FEC FORM 1

Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

(Revised 02/2009)

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5.			DMMITTEE (Check One)	
	Cand	didate C	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 the or information below.)	candidate
	Name Canc	e of didate		
		didate / Affiliation	on Office Sought: House Senate President	State
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Canc	e of didate		
	Party	/ Comm	ittee:	
	(d)			emocratic, publican,etc.) Party.
	Politi	ical Act	ion Committee (PAC):	
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected or	ganization is a:
			Corporation Corporation w/o Capital Stock Labor	Organization
			Membership Organization X Trade Association Coope	erative
			$\chi$ 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 fu committee. (i.e., nonconnected committee)	nd 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	Fundra	ising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mo committees/organizations, at least one of which is an authorized committee of a federal candidate.	pre political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mo committees/organizations, none of which is an authorized committee of a federal candidate.	pre political
		Com	mittees Participating in Joint Fundraiser	

1.		FEC ID number	C
2.		FEC ID number	C
3.	[	FEC ID number	C
4.		FEC ID number	C

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## COMMITTEE FOR/ADV OF SE COTTON (CASC) SOUTHERN COTTONGROWERS INC/SE COTTON GINNERS ASSN

	nume of Any Connected Org	anization, Affiliated Committee, Joint Fundra	along hepresentative,		oponisoi
S	Southern Cotton Growers	S			
ľ	Mailing Address	139 Prominence Court			
		Ste. 110			
		Dawsonville	GA	30534	
		СІТҮ	STATE	ZIP	CODE 🔺
ļ	Relationship:			_	
>	Connected Organization	Affiliated Committee Joint	Fundraising Representati	ve Leadership	PAC Sponsor
	Custodian of Records: Ide	ntify by name, address, (phone number - books and records.	- optional), and posit	ion of the person i	n
ļ	Full Name	rid Ruppenicker			
ľ	Mailing Address	6055 Summer Circle			
		Dawsonville	GA	30534	
	Title or Position ▼	CITY 🛦	STATE	ZIP	
-	Treasurer		Telephone number _	706 – 344	<u>1212</u>
		and address (phone number optional) o designated agent (e.g., assistant treasur vid Ruppenicker		committee; and th	ne
	Mr Do	6055 Summer Circle			
	of Treasurer Mr. Day	••	GA	30534	<u> </u>
	of Treasurer Mr. Day	6055 Summer Circle	GA Stati		 CODE &

FEC Form 1 (Revis	sed 02/2009)			Page 4
Full Name of Designated Agent	Mr. David Ruppenicker			
Mailing Address	6055 Summer Circle			
	Dawsonville	GA	30534	<b>i</b>
Title or Position ♥	CITY A	STATE	ZIP	CODE A
Treasur	rer	Telephone number	706 _ 344	1212
	aintains funds. y, etc. 3 & T	ich the committee deposits	iunds, holds accoun	its, rents
safety deposit boxes or m Name of Bank, Depository	naintains funds. y, etc. <b>3 &amp; T</b> <b>136 Hwy 400 S</b> <u>136 Hwy 400 S</u>			
safety deposit boxes or m Name of Bank, Depository	aintains funds. y, etc. 3 & T	nich the committee deposits		
safety deposit boxes or m Name of Bank, Depository	naintains funds. y, etc. 3 & T 136 Hwy 400 S Dawsonville CITY A			
safety deposit boxes or m Name of Bank, Depository	naintains funds. y, etc. 3 & T 136 Hwy 400 S Dawsonville CITY A			1                                 <b>34</b>   _   _
Safety deposit boxes or m Name of Bank, Depository	naintains funds. y, etc. 3 & T 136 Hwy 400 S Dawsonville CITY A			34
safety deposit boxes or m Name of Bank, Depository	naintains funds. y, etc. 3 & T 136 Hwy 400 S ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓			34
Safety deposit boxes or m Name of Bank, Depository	naintains funds. y, etc. 3 & T 136 Hwy 400 S ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓			34 ] - [ , , , , , , , , , , , , , , , , , ,
Safety deposit boxes or m Name of Bank, Depository	naintains funds. y, etc. 3 & T 136 Hwy 400 S ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓			34 ] - [ , , , , , , , , , , , , , , , , , ,