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STATEMENT OF **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. Alabama Retail Association PAC PO Box 240669 ADDRESS (number and street) (Check if address is changed) Montgomery 36124 ALCITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS awingate@alabamaretail.org (Check if address is changed) Optional Second E-Mail Address mandi@alabamaretail.org COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.alabamaretail.org/default.aspx (Check if address is changed) DATE 2013 C00511014 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. Alison Wingate Type or Print Name of Treasurer Alison Wingate [Electronically Filed] 05 13 2013 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 Only

Local 202-694-1100

	EEC Ea	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	гау е 2
Car	ndidate	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. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	(Damagueti-
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a:
		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 secommittee. (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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Na	me	
Alabama Reta	il Association PAC	
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	eted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
Custodian of Records: le books and records.	dentify by name, address (phone number optional) and position of the person	in possession of committee
	Freeman	
Full Name L Mailing Address	7265 Halcyon Summit Drive	
	Montgomery AL 36	3117
Title or Position	CITY STATE	ZIP CODE
Controller	Telephone number	_ 551 _ 0639
. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; and t ., assistant treasurer).	he name and address of
Full Name Alison V	Vingate	
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
Vice President	Telephone number	- 263 5757

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Full Name of Designated Agent							
Mailing Address							
		-					
	CITY STATE ZI	P CODE					
Title or Position							
	Telephone number =						
safety deposit bo	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rensafety deposit boxes or maintains funds. Name of Bank, Depository, etc.						
	ServisFirst Bank						
Mailing Address	P.O. Box 1508						
	Birmingham AL 35201-150	8					
	CITY STATE ZI	P CODE					
Name of Bank, I							
Name of Bank, I							
Name of Bank, I		P CODE					
Name of Bank, I	Depository, etc.	P CODE					
	Depository, etc.	P CODE					
	Depository, etc.	P CODE					