FEC FORM 1	STATEMEN ORGANIZA	-	Office Use	PAGE 1 / 4
1. NAME OF COMMITTEE (in fu	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5]
ADDRESS (number and s	street)			
(Check if add is changed)	ress			
			LAL 36304 STATE ▲	
COMMITTEE'S E-MAIL	ADDRESS			
(Check if add is changed)	ress libbiej@alpeanuts.com			
	Optional Second E-Mail Add appa@alpeanuts.com	ress		1
COMMITTEE'S WEB PA				
2. DATE 09	/ D D / Y Y Y Y 20 2023			
3. FEC IDENTIFICAT	ION NUMBER ► C CO	0211037		
4. IS THIS STATEMEN	NT X NEW (N) OR	AMENDED (A)		
I certify that I have example	nined this Statement and to the best of	of my knowledge and belief it	is true, correct and comple	ete.
Type or Print Name of 1	reasurer Johnson, Libbie, , ,			
Signature of Treasurer	Johnson, Libbie, , ,		Date 09 / 20	/ Y Y Y Y 2023
NOTE: Submission of fals	e, erroneous, or incomplete information n ANY CHANGE IN INFORMAT	nay subject the person signing th		s of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FORM 1 ed 06/2012)

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5. 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 the candidate information below.)											
Name of Candidate											
Candidate Office Party Affiliation Sought: House Senate President	State										
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District										
Name of Candidate											
Party Committee: (National, State or subordinate) committee of the (Democratic democratic dem	ratic, can, etc.) Party										
Political Action Committee (PAC):											
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a:										
Corporation Corporation w/o Capital Stock	or Organization										
Membership Organization X Trade Association Coo	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 segreg committee. (i.e., nonconnected committee)	gated 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.)											
(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	d PAC).										

Joint Fundraising Representative:

(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Committees Participating in Joint Fundraiser
2.

In addition, this committee is a Lobbyist/Registrant PAC.

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Write or Type Committee Name	
ALABAMA PEANUT PRODUCERS ASSOCIATION, PEANUTPAC O	F ALABAMA

6.	Name of Any Connected O	rganization,	Affiliated Committee,	Joint Fundraising	Representative, or	Leadership PAC Sponsor
	Mailing Address					
			CITY 🔺		STATE A	ZIP CODE
	Relationship: Connected	Organization	Affiliated Organizati	ion Joint Fund	aising Representative	e Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Johnso	, Libbie, , ,
Full Name	
Mailing Address	1810 Reeves St
	Dothan AK 36303 - - -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Tresaurer	Telephone number 334 - 792 - 6482

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 of Treasurer	Johnson, Libbie, , ,
Mailing Address	1810 Reeves St
	Dothan AK 36303 Image: Image
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Tresaurer	Image: Second

FEC Form 1 (Revised 02)2/2	20	09)																					Pag	je Z	1		
Full Name of Designated Agent																	1		1									1	
Mailing Address			1																										
	L																												
	L																												
								CI	ΤY								:	STA	λΤΕ				ZI	ΡC		DE			
Title or Position ▼																													
													Tele	əph	one	e n	umt	ber				- [_							

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.

Friend B	ank									
Mailing Address	3105 Ross Clark Circle									
	Dothan	AL 36303								
	CITY 🔺	STATE A	ZIP CODE ▲							
Name of Bank, Depository, etc.										
Mailing Address										
	CITY 🔺	STATE A	ZIP CODE ▲							