FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1 (See instructions)			Office use only			
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example over the	e: If typying, type lines	12FE4M5	Office use only
National Asso	ociation of	Wheat Growers Polit	tical Action C	Committee (Whe	ea- 	
	1111	1 1 1 1 1 1 1 1	1 1 1 1 1	1 1 1 1 1 1	11111	
ADDRESS (number and	I street)	415 2nd Street, NE	:			
(Check if add	rocc	Suite 300	1 1 1 1 1	1 1 1 1 1 1		
is changed)	1655	Washington			DC	20002 -
COMMITTEES E MA	VII ADDDEC	c	CITY▲		STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA						1
COMMITTEE'S WER		DECC (URL)	1 1 1 1			
COMMITTEE'S WEB	PAGE ADD	RESS (URL)				1
COMMITTEE'S FAX 2025462638	NUMBER					
2. DATE M 0 1		3 / Y Y Y Y Y Y Y				
3. FEC IDENTIFICA	ATION NUM	BER	C C0013	9964		
4. IS THIS STATE	MENT X	NEW (N) OR		AMENDED (A)		
I certify that I have exam	nined this Stat	ement and to the best of my k	knowledge and be	elief it is true, correct	and complete	
Type or Print Name of	f Treasurer	Mr. Daren Cop	pock			
Signature of Treasure	r Electron	ically Filed by Mr. Dare	en Coppock		Date 0 1	003
NOTE: Submission of fa		s, or incomplete information r			·	_
Office Use Only			Fed Tol	further information deral Election Commi I Free 800-424-9530 cal 202-694-1100	ssion	FEC FORM 1 (Revised 02/2003)

	FEO For n	m 1 (Revised 02/2003)	Page 2		
5.	TYPE OF COI	MMITTEE (Check One)			
	(a) (b)	This committee is a principal campaign committee. (Complete the candidate information below.) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	candidate		
	Name of Candidate				
	Candidate Party Affiliation	n Office Sought: House Senate President	State District		
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name of Candidate				
(d) This committee is a (National, State (or subordinate) committee of the Republica (e) X 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 promittee.					
6.	Name of Any	Connected Organization or Affiliated Committee			
	N.A.W.G				
L					
	Mailing Addres	ss 415 2nd Street, NE			
		Suite 300			
		Washington DC 2	20002		
		CITY ≜ STATE ≜	ZIP CODE		
	Relationship	connected organizati			
		ected Organization:			
		oration Corporation w/o Capital Stock Labor Organiza	ation		
	Mem	bership Organization Trade Association Cooperative			

Write or Type Committee Name

National Association of V	Wheat Growers Political	Action Committee	(WheatPAC)
---------------------------	-------------------------	------------------	------------

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							
Till and Davidson M	OLTV						
Title or Position ♥	CITY A	STATE▲	ZIP CODE A				
		Telephone number					
Treasurer: List the name name and address of any	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	ren Coppock						
of Treasurer Mr. Da	теп сорроск						
of Treasurer Mr. Da Mailing Address	200 W. Marshall St.						
			22046				
	200 W. Marshall St.		22046 ZIP CODE ▲				
Mailing Address	200 W. Marshall St. Falls Church CITY A	VA					
Mailing Address	200 W. Marshall St. Falls Church CITY A	VASTATE▲					
Mailing Address Title or Position ▼ Full Name of Designated	200 W. Marshall St. Falls Church CITY A	VASTATE▲					
Mailing Address Title or Position ▼ Full Name of Designated Agent	200 W. Marshall St. Falls Church CITY A	VASTATE▲					
Mailing Address Title or Position ▼ Full Name of Designated Agent	200 W. Marshall St. Falls Church CITY A	VASTATE▲					

	FEC Form 1	(Revised 02/2003) P:	age 4		
9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, resafety deposit boxes or maintains funds. Name of Bank, Depository, etc.				
	Mailing Address	Cardinal Bank 8270 Greensboro Drive			
		Suite 500 McLean			
		CITY A STATE A ZIP CO	DE 🛆		