Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) HEESE IMPORTERS ASSOCIATION OF AMERICA PAC 750 17TH STREET NW ADDRESS (number and street) SUITE 900 (Check if address is changed) WASHINGTON 20006 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS CIAAGeneralCounsel@huschblackwell.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 29 2020 C00212423 FEC IDENTIFICATION NUMBER > 3. 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. Berti, Andrea, , , Type or Print Name of Treasurer Berti, Andrea, , , [Electronically Filed] 06 16 2020 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

Local 202-694-1100

	FFC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>				
		OMMITTEE	i aye Z				
Can	ndidate	lidate 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. (Con information below.)	ncipal campaign committee. (Complete the candidate				
Nam Cand	e of didate						
	didate / Affiliati	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	Committee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a				
		Corporation 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 segregated fund of committee. (i.e., nonconnected committee)					
		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 transmittees/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.	wo or more political				
	Committees Participating in Joint Fundraiser						
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

Title or Position Treasurer

	_		_
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V	Vrite or Type Committee Name	;	
(	CHEESE IMPO	RTERS ASSOCIATION OF AM	MERICA PAC
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint Fundraising Repre	esentative, or Leadership PAC Sponsor
C	heese Importers Ass	ociation of America	<u>                                     </u>
	Mailing Address	515 2nd Street NE	
		Washington	DC 20002
		CITY	STATE ZIP CODE
	Relationship: <b>x</b> Connected	d Organization Affiliated Committee Joint Fundraising F	Representative Leadership PAC Sponsor
·.	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and positio	on of the person in possession of committee
	Berti, And	ea, , ,	
	Full Name	1 Atalanta Plaza	
	Mailing Address		
		Elizabeth	NJ 07206
	Title or Position	CITY	STATE ZIP CODE
	Custodian of Records	Telephone numb	per 908 - 372 - 6006
3.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the desistant treasurer).	committee; and the name and address of
	Full Name Berti, Andr	ea,,,	
	Mailing Address	1 Atalanta Plaza	
			<u> </u>
		Elizabeth	NJ    07206

CITY

STATE

Telephone number

908

ZIP CODE

6006

372

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Full Name of Designated Agent	Berti, Andrea, , ,					
Mailing Address	1 Atalanta Plaza					
-						
	Elizabeth NJ 072					
Title or Position	CITY STATE	ZIP CODE				
Designated Age	ent 908 Telephone number 908 -	372 6006				
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.  PNC Bank						
Mailing Address	1050 Connecticut Avenue NW					
	Washington DC 200	36 				
	CITY STATE	ZIP CODE				
Name of Bank,	Depository, etc.					
Mailing Address						
	CITY STATE					