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) CHEESE IMPORTERS ASSOCIATION OF AMERICA PAC 1801 Pennsylvania Ave, NW ADDRESS (number and street) **SUITE 1000** (Check if address is changed) WASHINGTON 20006 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address CIAAGeneralCounsel@huschblackwell.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00212423 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. Type or Print Name of Treasurer Pedersen, Kevin, , 11 20 2023 Signature of Treasurer Pedersen, Kevin, , , Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

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TYPE OF COMMITTEE:					
Candidate Committee:					
(a) This committee is a principal campaign committee. (Complete the candidate information)	ation below.)				
(b) This committee is an authorized committee, and is NOT a principal campaign comminformation below.)	mittee. (Complete the candidate				
Name of Candidate					
Candidate Office Party Affiliation Sought: House Senate	State President District				
(c) This committee supports/opposes only one candidate, and is NOT an authorized co					
Name of Candidate					
Party Committee:					
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party				
Political Action Committee (PAC):					
(e) X This committee is a separate segregated fund. (Identify connected organization on	line 6.) Its connected organization is a:				
Corporation Corporation w/o Capital Stock	Labor Organization				
Membership Organization X 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 committee. (i.e., nonconnected committee)	separate segregated fund or party				
In addition, this committee is a Lobbyist/Registrant PAC.					
In addition, this committee is a Leadership PAC. (Identify sponsor on line	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 PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.					
Joint Fundraising Representative:					
(i) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, at least one of which is an authorized committee of a fee	•				
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more po- committees/organizations, none of which is an authorized committee of a federal candidate.					
Committees Participating in Joint Fundraiser					
1.	C				

Title or Position ▼
Custodian of Records

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٧	Vrite or Type Committee Name					
	CHEESE IMPOR	RTERS ASSOCIATION OF AMI	ERICA PAC			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
	CHEESE IMPORTER	RS ASSOCIATION OF AMERICA PAC				
	Mailing Address	1801 Pennsylvania Ave, NW				
		SUITE 1000				
		WASHINGTON	DC 20006			
		CITY A	STATE ▲	ZIP CODE ▲		
	Relationship: X Connected	Organization Affiliated Organization Joint Fun	draising Representative	Leadership PAC Sponsor		
7.	Custodian of Records: Ident books and records.	fy by name, address (phone number optional) and po	sition of the person in possess	sion of committee		
	Pedersen,	Kevin, , ,				
	Full Name					
	Mailing Address	9240 Bonita Beach Road SE				
		Suite 1118				
		Bonita Springs	, , FL , , 34135	1.1		

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).

STATE ▲

Telephone number

408

ZIP CODE ▲

7245

309

CITY A

Full Name Pedersen, Kevin, , , of Treasurer 9240 Bonita Beach Road SE Mailing Address Suite 1118 Bonita Springs 34135 STATE ▲ ZIP CODE ▲ CITY A Title or Position ▼ Tresurer 408 309 7245 Telephone number

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Full Name of Designated Agent	Pedersen, Kevin, , ,						
Mailing Address	9240 Bonita Beach Road SE						
	Suite 1118						
	Bonita Springs	FL 34135					
Title or Position	CITY ▲	STATE ▲ ZIP CODE ▲					
Designated Ager		e number					
	Depositories: List all banks or other depositories in which the com xes or maintains funds.	nmittee deposits funds, holds accounts, rents					
Name of Bank, D	Name of Bank, Depository, etc.						
	PNC Bank						
Mailing Address	1050 Connecticut Avenue NW						
	Washington	DC 20036 -					
	CITY ▲	STATE ▲ ZIP CODE ▲					
Name of Bank, D	Depository, etc.						
Mailing Address							
	CITY ▲	STATE ▲ ZIP CODE ▲					