Image# 202010149285828028			_	PAGE 1 / 5
FEC FORM 1	STATEMEN ORGANIZ	-	Off	ice Use Only
1. NAME OF	(Check if name	Example:If typing, type over the lines.	12FE4M5	
	is changed)			
ADDRESS (number and street)	2155 HIGHWAY 42 SOUTH			
(Check if address				
is changed)	MCDONOUGH		GA 3025	52
			L L⊥_ STATE ▲	
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address	dconklin@sspba.org			1
is changed)				
	Optional Second E-Mail Add rwest@sspba.org	aress		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)	https://www.sspba.org			
is changed)				
2. DATE 10	2 / Y Y Y Y 2 2020			
3. FEC IDENTIFICATION N	UMBER ► C C	00265546		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief i	t is true, correct and	complete.
Type or Print Name of Treasure	Pr DIXON, DIANA RENEE, , ,			
Signature of Treasurer	DN, DIANA RENEE, , ,	[Electronically Filed]	Date	14 / Y Y Y Y Y 2020
NOTE: Submission of false, erron		may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	contact:	FEC FORM 1 (Revised 06/2012)

10/14/2020 12 : 28

F	EC Fo	rm 1 (Revised 02/2009)	Page 2	
TYPE	E OF C	OMMITTEE		
Can	didate	e 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. (Complet information below.)	e the candidate	
Name Cand				
Cand Party	lidate Affiliati	on Office Sought: House Senate President	State	
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name Cand				
Part	y Con	nmittee:		
(d)			mocratic, publican, etc.) Party.	
Poli	tical A	ction Committee (PAC):		
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is a	
		Corporation Corporation w/o Capital Stock	abor Organization	
		Membership Organization Trade Association	ooperative	
		In addition, this committee is a Lobbyist/Registrant PAC.		
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre 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.)		
Join	t Func	Iraising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political	
	Com	mittees Participating in Joint Fundraiser		
	1.	FEC ID number		
	2.	FEC ID number		
	3.	FEC ID number		
	4.	FEC ID number		

I

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Southern States Police	Benevolent Association, Inc.			
Mailing Address	2155 Highway 42 S.			
	McDonough		GA 30252	<u>2</u>
	CITY		STATE	ZIP CODE
Relationship: X Connected	Organization Affiliated Committee J	oint Fundraising	Representative	Leadership PAC Sponsor
 Custodian of Records: Ident books and records. 	ify by name, address (phone number opti	onal) and position	on of the person in	possession of committee
TUBB, WA	Ϋ́́́́́́́́́́́́́́́́́́́́́́́́́́́́́́́́́́́́			
Full Name	12155 Highway 42 S			
Mailing Address				
			GA 30252	2
Title or Position	CITY		STATE	ZIP CODE
		Telephone num	nber 770 –	389 _ 5391
 Treasurer: List the name and any designated agent (e.g., as 	address (phone number optional) of the teststant treasurer).	reasurer of the	committee; and the	name and address of

Full Name DIXC	ON, DIANA RENEE, , ,
Mailing Address	2155 HIGHWAY 42 SOUTH
	CITY STATE ZIP CODE
Title or Position CHIEF OPER OFFICE	ER Telephone number 770 - 389 - 5391

FEC Form 1 (Revised 02/2009)

Full Name of Designated	TUBB, WAYNE, , ,	
Agent		
Mailing Address	2155 Highway 42 S.	
	MCDONOUGH GA 30252	
	CITY STATE ZIP CODE	
Title or Position		5391

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.

Bank c	of the Ozarks		
Mailing Address	1400 S Zack Hinton Pkwy		
	McDonough	GA 3025	2
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

The connected organization is: Southern States Police Benevolent Association, Inc.

Form/Schedule: Transaction ID: