Image# 202003049203745057				
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4
1. NAME OF	(Check if name	Example: If typing, type		fice Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
ADDRESS (number and street)	PO Box 140082			
(Check if address is changed)	1			
is changed)	TOLEDO		OH 436	14
			STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)				
	Optional Second E-Mail Ad	dress @BEX.NET		
COMMITTEE'S WEB PAGE AI		IGRESS.COM		
	04 / Y Y Y Y 2020			
3. FEC IDENTIFICATION N	NUMBER ► C C	00734327		
4. 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 Treasur	er ZIMMERMAN, KURT, , ,			
Signature of Treasurer	MERMAN, KURT, , ,	[Electronically Filed]	Date 03	04 / Y Y Y Y 2020
NOTE: Submission of false, error	neous, or incomplete information ANY CHANGE IN INFORMATI			penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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I	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	
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. (Com information below.)	plete the candidate
Nam Canc	e of didate		
	didate / Affiliati	on REP Office Sought: K House Senate President	State OH District 09
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of didate		
Part	ty Con	nmittee:	
(d)			(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	nected 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 se committee. (i.e., nonconnected committee)	gregated 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 tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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2995

419

Telephone number

270

Write or Type Committee Name

CUSTODIAN OF RECORDS

any designated agent (e.g., assistant treasurer).

## ROB WEBER FOR CONGRESS

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

Mailing Address				
	CITY	STATE	ZIP CODE	
Relationship: Connected	d Organization Affiliated Committee	Joint Fundraising 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.				
	ntify by name, address (phone number opt	tional) and position of the pers	on in possession of committee	
books and records.	ntify by name, address (phone number op DN, JEAN, , ,	tional) and position of the pers	on in possession of committee	
books and records.		tional) and position of the pers	on in possession of committee	
books and records. ANDERSC	DN, JEAN, , , PO BOX 140082			
books and records. ANDERSC	DN, JEAN, , ,	tional) and position of the pers	on in possession of committee	

8.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of

Full Name of Treasurer	ZIMMERMAN, KURT, , ,
Mailing Address	PO BOX 140082
	CITY STATE ZIP CODE
Title or Position	Telephone number

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Full Name of Designated Agent	ALLEN, BRADLEY, , ,	
Mailing Address	PO BOX 140082	
	TOLEDO     OH     43614       -     -     -	
	CITY STATE ZIP CODE	
Title or Position	IONS DIREC     419     270     2995       Telephone number     1     1     1	

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.

Mailing Address	5 SOUTH MAIN STREET	
	OBERLIN	OH 44074
	CITY	STATE ZIP CODE
Name of Bank, [	Depository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE