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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Hinchman for Congress 116 Michigan Court ADDRESS (number and street) (Check if address is changed) Madison 35758 ALCITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS clayton@hinchmanforcongress.com (Check if address is changed) Optional Second E-Mail Address david@thedriscollgroup.net COMMITTEE'S WEB PAGE ADDRESS (URL) hinchmanforcongress.com (Check if address is changed) DATE 2017 C00648162 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. Rockhill, Nicholas, Ryan, Mr, Type or Print Name of Treasurer Rockhill, Nicholas, Ryan, Mr, [Electronically Filed] 04 15 2018 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 Only

Local 202-694-1100

FEC FC	orm 1 (Revised 02/2009)	Page 2
TYPE OF (COMMITTEE	
Candidat	e Committee:	
(a) x	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. (Cor information below.)	nplete the candidate
Name of Candidate	Hinchman, Robert, Clayton, Mr,	
Candidate	Office	State
Party Affiliat	ion REP Sought: X House Senate President	District 05
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	nmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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 s committee. (i.e., nonconnected committee)	egregated 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.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(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
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Nan		
Hinchman for 0		
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
WAR VETERANS FL	JND.	
Mailing Address	PO BOX 26141	
	ALEXANDRIA VA 22	2313
	CITY STATE	ZIP CODE
Relationship: Connecte	ted Organization Affiliated Committee X Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Idea books and records. 	entify by name, address (phone number optional) and position of the persor	in possession of committee
	Nicholas, Ryan, Mr,	
Full Name	,Fairburn Ave	
Mailing Address		
	Madison AL 3	5756
Title or Position	CITY STATE	ZIP CODE
Treasurer		6344
3. Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
Full Name Rockhill, of Treasurer	Nicholas, Ryan, Mr,	
Mailing Address	Fairburn Ave	
	Madison AL 38	5756 ZIP CODE
Title or Position Treasurer		520 6344

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE Z	ZIP CODE
Title or Position		
Name of Bank, [Depository, etc.	
	Progress Bank	
Mailing Address	Progress Bank 2746 Carl T. Jones	
Mailing Address		
Mailing Address		
Mailing Address	2746 Carl T. Jones Huntsville AL 35802	ZIP CODE
Mailing Address Name of Bank, E	2746 Carl T. Jones Huntsville CITY STATE	ZIP CODE
Name of Bank, [2746 Carl T. Jones Huntsville CITY STATE	ZIP CODE
	2746 Carl T. Jones Huntsville CITY STATE Depository, etc. Eagle Bank	ZIP CODE
Name of Bank, [2746 Carl T. Jones Huntsville CITY STATE Depository, etc. Eagle Bank	ZIP CODE