

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☒ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Association of Missouri Electric Cooperatives Political Action Committee

ADDRESS (number and street)

2722 East McCarty Street

☐ (Check if address is changed)

Jefferson City

CITY ▲

MO

STATE ▲

65101

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

aforck@amec.org

Optional Second E-Mail Address

msutherland@amec.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

01 / 16 / 2025

3. FEC IDENTIFICATION NUMBER ►

C C00008169

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 Treasurer Forck, Alayna, Nicole, ,

Signature of Treasurer Forck, Alayna, Nicole, ,

Date

01 / 16 / 2025

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  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE:

**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. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

Office Sought:

☐ House☐ Senate☐ President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

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) ☒ 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

☐

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 or party 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.)

- (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 proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (j) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.

2.

C

C

Write or Type Committee Name

## Association of Missouri Electric Cooperatives Political Action Committee

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

National Rural Electric Cooperatives Association America's Electric Cooperatives PAC

Mailing Address

4301 Wilson Blvd

Arlington

VA

22203

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☐ Connected Organization ☒ Affiliated Organization ☐ Joint Fundraising Representative ☐ 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.

Full Name

Forck, Alayna, Nicole, ,

Mailing Address

2722 East McCarty Street

Jefferson City

MO

65101

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

573

659

3439

## 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).

Full Name  
of Treasurer

Forck, Alayna, Nicole, ,

Mailing Address

2722 East McCarty Street

Jefferson City

MO

65101

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

573

659

3439

Full Name of  
Designated  
Agent

Forck, Alayna, Nicole, ,

Mailing Address

2722 East McCarty Street

Jefferson City

MO

65101

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

573

659

3439

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.

MECE Credit Union

Mailing Address

PO Box 1586

Jefferson City

MO

65102

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

FEC ID number

C \_\_\_\_\_

FEC ID number

C \_\_\_\_\_

FEC ID number

C \_\_\_\_\_

FEC ID number

C \_\_\_\_\_

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**Association of Missouri Electric Cooperatives  
\_\_\_\_\_  
\_\_\_\_\_

Mailing Address

2722 E McCarty Street  
\_\_\_\_\_  
\_\_\_\_\_

Jefferson City

MO

65101

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor8. **Designated Agent:** Identify by name, address (phone number – optional)Full Name Sutherland, Mike, , ,  
\_\_\_\_\_Mailing Address 2722 E McCarty Street  
\_\_\_\_\_  
\_\_\_\_\_

Jefferson City

MO

65101

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Deputy Treasurer  
\_\_\_\_\_

Telephone Number

573

659

3454

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  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲