FEC

Only

STATEMENT OF

PAGE 1 / 4

ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) INGRAM BARGE COMPANY POLITICAL ACTION COMMITTEE ONE BELLE MEADE PL 4400 HARDING RD ADDRESS (number and street) (Check if address is changed) **NASHVILLE** 37205 ΤN CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address Andrew.Brown@ingrambarge.com is changed) Optional Second E-Mail Address Elle.Stoss@ingrambarge.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00364471 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 Brown, Andrew, R, Mr., Brown, Andrew, R, Mr., Date 04 80 2024 Signature of Treasurer 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

E	EC Form 1 (Revised 03/2022)	Page 2						
	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 Office Party Affiliation Sought: House Senate President	State						
	(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 Republican,							
Political Action Committee (PAC):								
	(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:						
	Corporation Corporation w/o Capital Stock Labor Or	ganization						
	Membership Organization Trade Association Cooperat	ive						
	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 par 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.								
	C).							
	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political						
	(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							
	1C							

Title or Position ▼

Chief Legal Counsel

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_	FEC Form 1		2/2009)				Page 3
V	Vrite or Type Comm						TTEE
6.	INGRAM BARGE COMPANY POLITICAL ACTION COMMITTEE Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor						
	NONE						
	Mailing Address						
			<u> </u>				I I-I
			CIT	TY ▲		STATE ▲	ZIP CODE ▲
	Relationship:	Connected	Organization Affiliated C	rganization Jo	oint Fundraising	Representati	ve Leadership PAC Sponso
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	Stoss, Elle,	,,				
	Mailing Address		4400 Harding Pike				
			Nashville			, TN ,	37205
	Title or Position	_	CIT	ΓΥ ▲		STATE ▲	ZIP CODE ▲
	Accountant	<u> </u>		1	Telephone num	ber 61	5 298
8.			l address (phone number ssistant treasurer).	optional) of the tr	easurer of the	committee; a	and the name and address of
	Full Name of Treasurer	Brown, And	Irew, R, Mr.,				
	Mailing Address		4400 Harding Pike				
			Nashville 			TN	37205
			СП	Γ Υ ▲		STATE ▲	ZIP CODE ▲

615

Telephone number

3113

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent	Grett, Angela, , ,		
Mailing Address	4400 Harding Pike		
	Nashville	TN	37205
Tille on Dealth a	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position VP Corporate Aff		number 61	5 - 517 - 3017
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the commes or maintains funds.	mittee deposits fu	ands, holds accounts, rents
Name of Bank, D	epository, etc.		
	Bank of America, N.A.		
Mailing Address			
	Willmington	ı ı DE ı	19850
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲