FEC

Office

Use

Only

STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER

2017 OCT 16 AM 7: 41 FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. ioiviaidioi itisisioicii iaitiioni 1Whielasti ADDRESS (number and street) (Check if address is changed) ZIP CODE A COMMITTEE'S E-MAIL ADDRESS (Check if address Idipiar Kinnision ecolloriadowhearthorg is changed) Optional Second E-Mail Address biradier Kerrecolorradowheatinoria COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address WWW. ICO horriado Wheraiti-101/191 is changed) 10/06/2017 DATE FEC IDENTIFICATION NUMBER > IS THIS STATEMENT OR AMENDED (A) NEW (N) 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 Signature of Treasurer Date 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.

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

FEC FORM 1

(Revised 06/2012)

FE	C Fo	rm 1 (Revised 02/2009)	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								
Candida Party A		on Office Sought: House Senate President	State						
(c)	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.								
Name of Candida									
Party	Con	mmittee:							
(d)			Democratic, epublican, etc.) Party.						
Politic	cal A	Action Committee (PAC):							
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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.)							
Joint Fundraising Representative:									
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political						
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political						
	Committees Participating in Joint Fundraiser								
	1.		<u></u>						
	2.								
	3.								
	4.								

ı	FEC Form 1 (Revised	02/2009)				Pa	ge 3	
Write or Type Committee Name								
	Cala Acca	of Wheat	Grown	PA	r	•		
— 6.	Name of Any Connected	Organization, Affiliated		-	esentative, o	r Leadership PAC	Sponsor	
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		Bulitle 1110						
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			CITY		STATE	ZIP CO		
	Relationship: X Connecte	ed Organization Affiliat	ted Committee	oint Fundraising	Representativ	ve Leadership	PAC Sponsor	
	/\$	L	L.	-		Sand .	ı	
7.	Custodian of Records: Ide	entify by name, address (p	phone number opt	ional) and positi	on of the per	son in possession	of committee	
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		Fort Co	liling			80525	- [
	Title or Position		CITY		STATE	ZIP CO	DE :	
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8.	Treasurer: List the name at any designated agent (e.g.,		er optional) of the	treasurer of the	committee; a	and the name and	address of	
	Full Name of Treasurer	bie Eller	Packi	MISIOIM I	1.1.1.		: 	
	Mailing Address	4026 501	uth Tim	berlin	ne Ric	nad I I I	لبب	
		Suiterla		1 1 1	1 1 1 1 .		لبين	
		Farity (Co)	يرجمشليا		لها	80525	-	
	Title or Position		CITY		STATE	ZIP CO	DE ,	
	Liveasiuver	- Bow Lleien	er.	Telephone num	ber <u>9.7</u>	_O-H4.입-	6994	

CITY

ZIP CODE

STATE

Mailing Address

MAILED FROM ZIP CODE 80525





2017-10-16-03-00177138

E Street, NW

Commission

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