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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) over the lines. is changed) The National Rural Electric Cooperative Association Action Committee for Rural Electrification (America's Electric Cooperatives PAC) 4301 Wilson Blvd ADDRESS (number and street) (Check if address is changed) Arlington 22203 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS pacteam@nreca.coop (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00002972 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT NEW (N) 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. Snow, Gabe, S,, Type or Print Name of Treasurer Snow, Gabe, S,, [Electronically Filed] 02 2023 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. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530 Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2
. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee	ee. (Complete the candidate information below.)
(b) This committee is an authorized committee, and information below.)	is NOT a principal campaign committee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought:	House Senate President District
(c) This committee supports/opposes only one cand	idate, and is NOT an authorized committee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, or subording)	State (Democratic, nate) committee of the Republican, etc.) Party
Political Action Committee (PAC):	
(e) X This committee is a separate segregated fund. (	dentify 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 Lobbyis	st/Registrant PAC.
(f) This committee supports/opposes more than one committee. (i.e., nonconnected committee)	Federal candidate, and is NOT a separate segregated fund or party
In addition, this committee is a Lobbyi	st/Registrant PAC.
In addition, this committee is a Leader	ship PAC. (Identify sponsor on line 6.)
(g) This committee is an independent expenditure-or	nly political committee (Super PAC).
In addition, this committee is a Lobbyis	st/Registrant PAC.
(h) This committee is a political committee with both	contribution and non-contribution accounts (Hybrid PAC).
In addition, this committee is a Lobbyis	st/Registrant PAC.
Joint Fundraising Representative:	
(1)	aising expenses and disburses net proceeds for two or more political is an authorized committee of a federal candidate.
(j) This committee collects contributions, pays fundricommittees/organizations, none of which is an a	aising expenses and disburses net proceeds for two or more political uthorized committee of a federal candidate.
Committees Participating in Joint Fundraiser	
1. [ , , , , , , , , , , , , , , , , , ,	C
	C

	FEC Form 1 (Revised	02/2009)	Page <b>3</b>
W	/rite or Type Committee Name	9	
	The National Rural Electric	Cooperative Association Action Committee for Rural Electrification (Americal	s Electric Cooperatives PAC)
ô.	=	Organization, Affiliated Committee, Joint Fundraising Representative, or tric Cooperative Association (NRECA)	r Leadership PAC Sponsor
	Mailing Address	4301 Wilson Blvd	
		Arlington	22203
		CITY ▲ STATE ▲	ZIP CODE ▲
	Deletienskin: Y Connected		
	Relationship: X Connected	d Organization	ve Leadership PAC Spons
7.	Custodian of Records: Identification books and records.	ntify by name, address (phone number optional) and position of the person in	n possession of committee
	Snow, Ga	be, S, ,	
	Full Name		
	Mailing Address	4301 Wilson Blvd	
		Arlington	22203
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number 70	3 - 907 - 5799
3.		nd address (phone number optional) of the treasurer of the committee; a	and the name and address of
	any designated agent (e.g.,	assistant treasurer).	
	Full Name Snow, Ga	be, S, ,	
	of Treasurer		
	Mailing Address	4301 Wilson Blvd	
		Arlington	22203
		CITY ▲ STATE ▲	710 0005 4
	Title or Position ▼	SINI 2	ZIP CODE ▲

	FEC Form 1	(Revised 02/2009)		Page <b>4</b>
	Full Name of Designated Agent Mailing Address	Lewis, Amy, B, ,  4301 Wilson Blvd  Arlington	VA VA	22203
	Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
	Assistant Treasur		number 700	3 - 907 - 6917
•		Depositories: List all banks or other depositories in which the commes or maintains funds.	nittee deposits fur	nds, holds accounts, rents
	Name of Bank, D	epository, etc.		
	Mailing Address	Wells Fargo  420 Montgomery St  San Francisco	CA	94104
		CITY A	STATE ▲	ZIP CODE ▲
	Name of Bank, D	epository, etc.  Homestead Funds    c/o BFDS   PO Box 219486		
		Kansas City	MO	64121
		CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Page \_5 **of** \_19\_\_

5(a)	or(h). <b>Joint Fundraisin</b>	p Participant:		_
<b>(9</b> )	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundrai mittee for Rural Electrification - Idaho		
	Mailing Address	P O BOX 608		
		Burley	L ID	83342
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization X Affiliated Committee Joint F	undraising Representa	tive Leadership PAC Sponsor
3.		by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.		by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name			
3.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
3.	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE A	
3.	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE A	
3. 9.	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE A	
3. 9.	Full Name	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE A	
3. 9.	Full Name	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE A	

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisin</b>			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Spon
	iana Statewide Association of RECs		
l			
	0000 Karatan Orașia a		
Mailing Address	8888 Keystone Crossing		
	Suite 1600		
	Indianapolis	IN I	46240
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC S
		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify  Full Name		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional)	Fundraising Represent	Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY		
Full Name   Mailing Address	by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor of the deposite boxes or main arms of Bank,	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor of the deposite boxes or main arms of Bank,	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor dety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor dety deposit boxes or material depository, etc.	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponso
Li i i i i i i i i i i i i i i i i i i			
Mailing Address	509 East Carthage		
	PO Box 790		
	Meade 	KS KS	67864
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization X Affiliated Committee Join	t Fundraising Representa	ative Leadership PAC Spo
Full Name	by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	т	elephone Number	
safety deposit boxes or ma	<b>ries:</b> List all banks or other depositories in which iintains funds.	the committee deposit	s funds, holds accounts, rents
Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which iintains funds.	the committee deposit	s funds, holds accounts, rents
safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposite	s funds, holds accounts, rents
Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	the committee deposite	s funds, holds accounts, rents

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1	1		
		FEC ID number	С
I		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected Speak up for Rui	d Organization, Affiliated Committee, Joint Fundral Electrification	raising Representative	e, or Leadership PAC Sponso
Mailing Address	PO Box 32170		
	Louisville	KY KY	40232
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number - optional)		
Designated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fur	draising Representativ	e, or Leadership PAC Spon
Louisiana Action	Committee for Rural Electrification		
Mailing Address	10725 AIRLINE HWY		
	Baton Rouge	LA LA	70816
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee Jo	int Fundraising Represent	ative Leadership PAC S
	d Organization Affiliated Committee Jo	int Fundraising Represent	ative Leadership PAC S
		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi			Leadership PAC S
esignated Agent: Identi	y by name, address (phone number – optional)		
esignated Agent: Identing Full Name	y by name, address (phone number – optional)		
esignated Agent: Identing Full Name     Mailing Address	y by name, address (phone number – optional)  CITY	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identing Full Name     Mailing Address	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
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## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	rganization, Affiliated Committee, Joint Fund	FEC ID number FEC ID number FEC ID number FEC ID number	C C C
3. 4. 4. Any Connected On		FEC ID number	C
4		FEC ID number	С
ame of Any Connected O			
		Iraising Representative	
			, or Leadership PAC Spon
Mailing Address	12300 Elm Creek Blvd		
	Maple Grove	MN	55369
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Full Name	oy name, address (phone number – optional)		
Mailing Address			
	<u> </u>		
TITLE OR POSITION ▼	, CITY A	STATE ▲	ZIP CODE ▲
	1	Telephone Number	
afety deposit boxes or maint	es: List all banks or other depositories in which tains funds.	the committee deposits	s funds, holds accounts, ren
epository, etc.			
ame of Bank, epository, etc.  Mailing Address			

FEC Form 1S (Revised 02/2017) for

h). <b>Joint Fundrais</b>	ng rantopant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
=	d Organization, Affiliated Committee, Joint Fundre e for Rural Electrification/MO Coopera		e, or Leadership PAC Spon
Action Committee			
Mailing Address	PO Box 1645		
Mailing Address			
	Jefferson City	, MO	65102
Deletienskin			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joint ify by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Representation	ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident		Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)	STATE A	
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of the control of	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3		FEC ID number	С
4.		FEC ID number	C
=	d Organization, Affiliated Committee, Joint Funds		
Electric Coopera	tives of Mississippi Action Committee	Tor Rural Electri	
	<u> </u>		
	<sub>1</sub> PO Box 3300		
Mailing Address			
	Ridgeland	MS MS	39158
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	g Participant:		
1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spor
Montana Action C	committee for Rural Electrification		
	PO Box 1306		
Mailing Address			
	Great Falls	MT MT	59403
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization X Affiliated Committee Joi	int Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)	1	
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A		
Full Name	CITY A		
Full Name Mailing Address  TITLE OR POSITION	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mail	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito fety deposit boxes or material deposit boxes or material deposit boxes are material deposited.	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito fety deposit boxes or material deposit boxes or material deposit boxes are material deposit boxes.	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito fety deposit boxes or material depositions are of Bank, epository, etc.	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or material deposit boxes or material depository, etc.	CITY A	STATE A Telephone Number	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Funda		
Basin Electric Po	wer Cooperative Political Action Com	ımıttee (Basın El	ectric PAC)
<u>.</u>			
	1717 E Interstate Ave		
Mailing Address	1717 E Illerstate Ave		
	Bismarck	ND ND	58503
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Joint	Fundraising Represent	ative Leadership PAC S
	Affiliated Committee Joint by by name, address (phone number – optional)	Fundraising Represent	Leadership PAC S
		Fundraising Represent	Leadership PAC S
esignated Agent: Identi		Fundraising Represent	Leadership PAC S
esignated Agent: Identi		E Fundraising Represent	Leadership PAC S
esignated Agent: Identi		E Fundraising Represent	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	E Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisir</b>	g Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3		FEC ID number	C
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun		
Ohio Action Committee for	Rural Electrification (ACRE)/Ohio Rural Electric Coo	peratives, Inc./National Ru	ral Electric Cooperative Association
	2077 5 4 54 4		
Mailing Address	6677 Busch Blvd		
	Columbus	OH	43229
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee Jo	int Fundraising Represent	ative Leadership PAC Spons
Full Name			
Mailing Address			
	1		1
TITLE OR POSITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
LILL OR FOSITION	1	Telephone Number	
			_
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	th the committee deposit	s funds, holds accounts, rents
Name of Bank,			
Depository, etc.			
Mailing Address			
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

n). <b>Joint Fundraisin</b>	· · · · ·		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spor
Oklahoma Associa	ation of Electric Cooperatives-ACRE		
Mailing Address	2325 E I-44 Service Rd		
	Oklahoma City	OK OK	73111
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization X Affiliated Committee Joint	t Fundraising Representa	ative Leadership PAC S
	Organization Affiliated Committee Joint by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name			Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)  CITY		
Full Name  Mailing Address  TITLE OR POSITION  Anks or Other Depositor fety deposit boxes or maintenance of Bank,	by name, address (phone number – optional)  CITY   CITY   ies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	by name, address (phone number – optional)  CITY   CITY   ies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor dety deposit boxes or main manual ma	by name, address (phone number – optional)  CITY   CITY   ies: List all banks or other depositories in which	STATE A	ZIP CODE A

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n). <b>Joint Fundraising</b>			1 -			
1.				C ID number	C	-
2.			FE	C ID number	С	-
3			FE	C ID number	C	
4.			FE	C ID number	C	
ame of Any Connected (			Fundraising	Representativ	ve, or Leadership PAC	Spor
Aiken Electric Coo	perative Inc. PAC					
Mailing Address	2790 Wagener Road					
	PO Box 417					
	Aiken			SC	29802	
Relationship:		CITY A		STATE A	ZIP COD	FA
Connected		ated Committee		aising Represent	tative Leadership I	
Connected				aising Represent	tative Leadership I	
Connected esignated Agent: Identify				aising Represent	tative Leadership I	
Connected esignated Agent: Identify Full Name				aising Represent	tative Leadership F	
Connected esignated Agent: Identify Full Name	by name, address (pho		nal)	aising Represent	tative Leadership F	PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address (pho	one number – optior	nal)	aising Represent		PAC S
Connected esignated Agent: Identify Full Name	by name, address (pho	one number – option	nal)			PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address (pho	one number – option	Telephon	STATE A	ZIP CODE	PAC S
Esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositorifety deposit boxes or mai	by name, address (pho	one number – option	Telephon	STATE A	ZIP CODE	PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositorifety deposit boxes or mail	by name, address (pho	one number – option	Telephon	STATE A	ZIP CODE	PAC S
connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositoring the deposit boxes or main the depository, etc.	by name, address (pho	one number – option	Telephon	STATE A	ZIP CODE	PAC S

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h). <b>Joint Fundraisi</b>	.g . apa		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
-	Organization, Affiliated Committee, Joint Fund Cooperative Inc. Employee PAC	draising Representativ	e, or Leadership PAC Spon
Mailing Address	P.O. Box 1234		
	Moncks Corner	SC	29461
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee Jointy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

(h). <b>Joint Fundraisi</b> r		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Wyoming Rural E	lectric Association PAC		
	<sub>1</sub> 2312 Carey Ave		
Mailing Address			
			20004
	Cheyenne	WY	82001
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization  Affiliated Committee  Joint  y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Represent	Leadership PAC S
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the control of th	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the control of th	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the control of th	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the second content of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A