FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Heartland Patriots PO Box 1240 ADDRESS (number and street) (Check if address is changed) Independence 64051 MO CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address compliance@pocketbookstrategies.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00771972 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. Type or Print Name of Treasurer Stanger, Howie,, Date 12 16 2024 Signature of Treasurer Stanger, Howie, , , 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

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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 information below.)	e candidate
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.	Diotriot
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republican,	•
Political Action Committee (PAC):	
(e) 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 O	rganization
Membership Organization Trade Association Coopera	tive
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 committee. (i.e., nonconnected committee)	d 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) X This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	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.	r more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
Committees Participating in Joint Fundraiser	
1C	
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			l
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٧	Vrite or Type Committee Name		
	Heartland Patrio	ts	
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
	NONE		
	Mailing Address		
			[-] [
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected		Leadership PAC Sponsor
	nelationship.	Organization Anniated Organization John Fundralsing Representative	Leadership FAC Sponsor
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person in possess	ion of committee
	Stanger, H	avia.	
	Full Name	Jwie, , ,	
	Mailing Address	PO Box 1240	
		T	1
		Independence I MO I 64051	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	929
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the natassistant treasurer).	ame and address of
	Full Name Stanger, H	owie, , ,	
	of Treasurer		
	Mailing Address	PO Box 1240	
		Independence MO 64051	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		929 0276

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Full Name of Designated Agent	Hall, Mo, Rudick, ,		
Mailing Address	PO DOX 1240		
	Independence	MO	64051
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasur	er Telephone r	number L	
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the commes or maintains funds.	nittee deposits fu	unds, holds accounts, rents
Name of Bank, D	epository, etc.		
	Bank of America		
Mailing Address	4041 S Lynn Court Dr		
	Independence	MO	64055
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Amalgamated Bank		
Mailing Address	1825 K St NW		
	Washington	DC	20006
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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1.	rganization, Affiliated Commit	FEC FEC	ID number ID number ID number ID number	C C C or Leadership PAC Spon
3. 4. 4.	rganization, Affiliated Commit	FEC FEC	ID number	C
4.	rganization, Affiliated Commit	FEC	ID number	C
	rganization, Affiliated Commit			
ame of Any Connected O	rganization, Affiliated Commit	tee, Joint Fundraising F	lepresentative	or Leadership PAC Spon
Mailing Address				
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Full Name	y name, address (phone numb	ei – opiionai)		
Mailing Address				
TITLE OR POSITION ▼	CITY A		STATE ▲	ZIP CODE ▲
		Telephone	Number	
	s: List all banks or other deportains funds.	sitories in which the com	mittee deposits	funds, holds accounts, ren
afety deposit boxes or maintains ame of Bank, Ramp				
afety deposit boxes or maintained ame of Bank, epository, etc.	28 W 23rd St			
afety deposit boxes or maining ame of Bank, epository, etc.				