Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC 1 ENERGY PLACE ADDRESS (number and street) (Check if address is changed) **PENSACOLA**  $\mathsf{FL}$ 32520 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS CBStadle@southernco.com (Check if address is changed) Optional Second E-Mail Address VRANDRY@southernco.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00120519 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. WILLIAM GOLAN BUCK Type or Print Name of Treasurer WILLIAM GOLAN BUCK [Electronically Filed] 09 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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

FFC F	form 1 (Revised 02/2009)	Page <b>2</b>	
TYPE OF	COMMITTEE	. wg	
Candida	te 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 Affilia	Office Sought: House Senate President	State	
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate			
Party Co	mmittee:	(Demogratic	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.	
Political	Action Committee (PAC):		
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a	
	X 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 s committee. (i.e., nonconnected committee)	egregated 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.)		
Joint Fur	draising Representative:		
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.		
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political	
Co	mmittees Participating in Joint Fundraiser		
1.	FEC ID number		
2.	FEC ID number		
3.	FEC ID number		
4.			

FEC <b>Form 1</b> (Revised (	72/2009)	Page <b>3</b>
Write or Type Committee Name		i aye <b>y</b>
	ERNMENT COMMITTEE OF GULF POWER COMPANY EM	PLOYEES INC
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	
-	riganization, riminator committos, some i anaraising representativo, et zeaasisi.	.р т то оролоог
Gulf Power Company	<u> </u>	
Mailing Address	One Energy Place	
	Pensacola FL 32520	
	CITY STATE 2	ZIP CODE
Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
Custodian of Records: Iden books and records.	ntify by name, address (phone number optional) and position of the person in poss	session of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE Z	IP CODE
	Telephone number	
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the namessistant treasurer).	ne and address of
	r B. Stadler	1
of Treasurer	One Energy Place	
Mailing Address		
	Penacola FL 32520	
Title or Position Treasurer		IP CODE 44 <sub>  1</sub> 6018 <sub> </sub>
	Telephone number	

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Full Name of Designated Agent	Vincent Andry	, , , , , , , , , , , , , , , , , , ,			
Mailing Address	One Energy Place				
-	Pensacola FL 32520				
Title or Position Chariman	CITY STATE  Telephone number	ZIP CODE			
<ul> <li>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.</li> <li>Name of Bank, Depository, etc.</li> </ul>					
	Gulf Power Employees Credit Union				
Mailing Address	200 N Pace Blvd				
	Pensacola FL 32505				
	CITY STATE	ZIP CODE			
Name of Bank, [	Depository, etc.				
Mailing Address					
	CITY STATE				