Image# 202009289284978254				PAGE 1 / 5
FEC FORM 1	STATEMEN ORGANIZ	_	Offic	e Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
	P.O. BOX 1006			
ADDRESS (number and street)				
(Check if address is changed)				
			ME STATE ▲	
COMMITTEE'S E-MAIL ADDF	RESS			
(Check if address is changed)		Г.СОМ		
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)			
	28 <sup>/</sup> Y Y Y Y 2020			
3. FEC IDENTIFICATION I	NUMBER ► C c	00759779		
4. 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 c	complete.
Type or Print Name of Treasu	rer RUTLAND, JANNA, , ,			
Signature of Treasurer	TLAND, JANNA, , ,	[Electronically Filed]	Date 09	28 / Y Y Y Y 2020
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing t ON SHOULD BE REPORTED W		enalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	on 🔽	EC FORM 1 (Revised 06/2012)

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FE	C For	m 1 (Revised 02/2009)	Page <b>2</b>
TYPE (	OF CO	DMMITTEE	
Candi	date	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. (Compleinformation below.)	te the candidate
Name c Candida			
Candida Party A		n Office Sought: House Senate President	State
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida			
Party	Com	mittee:	
(d)			emocratic, publican, etc.) Party
Politic	al Ac	tion Committee (PAC):	
(e)	П	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is
		Corporation Corporation w/o Capital Stock	abor Organization
			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 segre committee. (i.e., nonconnected committee)	egated 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 F	und	aising 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.	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
(	Comr	nittees Participating in Joint Fundraiser	
	1.	FEC ID number	
:	2.	FEC ID number	
:	3.	FEC ID number	
	4.	FEC ID number	

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## MAINE OUTDOOR HERITAGE PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address																																					
																											L						- [				
											CI	TΥ											S	TAT	E					Z	ΙP	СС	DD	Ε			
Relationship:	Con	nec	tec	d Oi	rga	niza	atio	n	Aff	iliat	ted	Со	mn	nitte	e	C	Jo	oint	Fu	ndra	aisii	ng l	Rep	ore	ser	itati	ve	C	L	ead	lers	ship	D P.	AC	Spo	ons	or

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

RUTLAND	, JANNA, , ,	
Full Name		
Mailing Address	2024 3RD AVE NORTH	
	SUITE 212	
	BIRMINGHAM	AL 35203
Title or Position	CITY	STATE ZIP CODE
	Telephone nu	mber

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	RUTLAND, JANNA, , ,
Mailing Address	2024 3RD AVE NORTH
	SUITE 212
	BIRMINGHAM
	CITY STATE ZIP CODE
Title or Position TREASURER	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent														1									1			
Mailing Address																										
																			L				_			
						C	:IT)	(								STA	ΤE				ZII	ΡC	OD	١E		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

9. 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.

Name of Bank, Depository, etc.

CHA		
Mailing Address	1445-A LAUGHLIN AVE	
		VA 22101 -
	CITY	STATE ZIP CODE
Name of Bank, Deposito	ry, etc.	
Mailing Address		
	CITY	STATE ZIP CODE

## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: