PAGE 1/8 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) WATERPAC - NATIONAL RURAL WATER ASSOCIATION POLITICAL COMMITTEE 2915 SOUTH 13TH ADDRESS (number and street) (Check if address is changed) DUNCAN 73533-OK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS outsourcing@aristotle.com (Check if address is changed) Optional Second E-Mail Address BillS@nrwa.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2019 C00202184 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. Simpson, William, , , Type or Print Name of Treasurer Simpson, William, , , [Electronically Filed] 01 02 2019 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. FEC FORM 1

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

	FFC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	i aye Z
Can	ndidate	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. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	(Damas anatis
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name	,	
WATERPAC - NAT	IONAL RURAL WATER ASSOCIATION	N POLITICAL COMMITTEE
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Repres	sentative, or Leadership PAC Sponsor
ARKANSAS RURAL V	VATER ASSOCIATION FEDERAL POLITIC	AL ACTION COMMITTEE
Mailing Address	POST OFFICE BOX 860	
	LONOKE	AR 72086-
	CITY	STATE ZIP CODE
Relationship: Connected	d Organization 🗶 Affiliated Committee Joint Fundraising R	epresentative Leadership PAC Sponsor
<ol> <li>Custodian of Records: Iden books and records.</li> </ol>	tify by name, address (phone number optional) and position	of the person in possession of committee
Churchma	n, Brian, , ,	
Full Name	,2915 S 13th St	
Mailing Address		
		OV 70500 0000
	Duncan	OK 73533-9086
Title or Position	CITY S	TATE ZIP CODE
Custodian of Records	Telephone number	er 580 - 252 - 0629
3. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the consistant treasurer).	ommittee; and the name and address of
Full Name Simpson, V	Villiam, , ,	
Mailing Address	101 Constitution Ave NW	
	Washington	DC    20001-2133   _
	CITY S	TATE ZIP CODE
Title or Position Treasurer	Telephone number	er 202 - 742 - 4363

FEC Form	m 1 (Revised 02/2009)		Page <b>4</b>
Full Name of Designated	Churchman, Brian, , ,		
Agent	<sub>1</sub> 2915 S 13th St		
Mailing Address			
	Duncan	OK 73533-9	086
	CITY	STATE	ZIP CODE
Title or Position Custodian of Re	ecords Telephone numb	per 580 –	252   -   0629
	r <b>Depositories:</b> List all banks or other depositories in which the committee oxes or maintains funds.  Depository, etc.  Arvest Bank	e deposits funds, holds	s accounts, rents
	PO Box 1508		
Mailing Address			
	729 W. Main		
	Duncan	OK 73533	
	CITY	STATE	ZIP CODE
Name of Bank, I	Depository, etc.		
	I		, , , , , , I
Mailing Address			

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

FEC Form 1S (Revised 02/2017)

5(g) or (h). <b>Joint Fundraising</b>	Participant:	
1.		FEC ID number
2.		FEC ID number
3.		FEC ID number
4.		FEC ID number
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	ing Representative, or Leadership PAC Sponsor
Mailing Address	2915 S. 13th Street	
	Duncan	, OK , 73533-
Relationship:	CITY A	STATE A ZIP CODE A
<b>x</b> Connected	Organization Affiliated Committee Joint Fu	ndraising Representative Leadership PAC Sponsor
8. <b>Designated Agent:</b> Identify	by name, address (phone number – optional)	
Full Name		
Mailing Address		
	CITY A	STATE ▲ ZIP CODE ▲
TITLE OR POSITION	CITY	STATE A ZIP CODE A
	Telep	hone Number
9. Banks or Other Depositori safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositories in which the ntains funds.	committee deposits funds, holds accounts, rents
	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Mailing Address		
	CITY A	STATE ▲ ZIP CODE ▲ ■

FEC Form 1S (Revised 02/2017)

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

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	A Communication Affiliated Community of Laint Franch	usinin n Donous autotin	a an Landaushia BAO Cana
=	d Organization, Affiliated Committee, Joint Fundr WATER ASSOCIATION PAC	aising Representative	e, or Leadership PAC Spon
Mailing Address	1616 RIO GRANDE ST		
	AUSTIN	, , , , , , TX ,	78701-
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee Joint  fy by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi		Fundraising Representation	ative Leadership PAC S
esignated Agent: Identi		Fundraising Representation	ative Leadership PAC S
esignated Agent: Identi		Fundraising Representation	ative Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
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	fy by name, address (phone number – optional)  CITY	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
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the state 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
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the state 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
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the deposite boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the deposite boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

h). <b>Joint Fundrais</b> i	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
OHIO RURAL W	ATER ASSOCIATION PAC		
	<sub>I</sub> 55 WHITES ROAD		
Mailing Address	33 WIII ES NOAD		
	ZANESVILLE	OH OH	43701-
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee Join	nt Fundraising Represent	ative Leadership PAC Sp
Connecto	ed Organization X Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
Connecto		nt Fundraising Represent	ative Leadership PAC Sp
Connecte 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: Identification  Full Name  Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
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Esignated Agent: Identification of Bank, Connected Esignated Agent: Identification of Connected Esignated	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

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

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
		FEC ID number	С
4.			
lame of Any Connected	d Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
LOUISIANA RUF	RAL WATER ASSOCIATION FEDE	RAL POLITICAL A	CTION COMMITTEE
1			
Mailing Address	PO BOX 180		
	KINDER	l LA I	70648-
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
П.		oint Fundraising Representa	
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi	ify by name, address (phone number – optional)		
	ify by name, address (phone number – optional)		
Full Name	ify by name, address (phone number – optional)		
Full Name	ify by name, address (phone number – optional)		
Full Name	CITY		ZIP CODE A
Full Name	CITY	STATE A	
Full Name	CITY		
Full Name Mailing Address  TITLE OR POSITION	CITY ▲  ories: List all banks or other depositories in whi	STATE   Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	CITY ▲  ories: List all banks or other depositories in whi	STATE   Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	CITY ▲  ories: List all banks or other depositories in whi	STATE   Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, pepository, etc.	CITY ▲  ories: List all banks or other depositories in whi	STATE   Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, pepository, etc.	CITY ▲  ories: List all banks or other depositories in whi	STATE   Telephone Number	ZIP CODE A