FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Old National Bank PAC 1 Main Street ADDRESS (number and street) (Check if address is changed) Evansville 47708-IN CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tim.geibel@oldnational.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 05 2019 C00165282 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. Geibel, Tim, , , Type or Print Name of Treasurer Geibel, Tim, , , [Electronically Filed] 80 06 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. 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 Fo	rm 1 (Revised 02/2009)	Page 2				
		OMMITTEE	raye z				
Can	didate	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.)					
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.					
Name Cand	e of didate						
Par	ty Con	nmittee:	(D				
(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 segregated fund or pa committee. (i.e., nonconnected committee)					
		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 to committees/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.	vo or more political				
	Com	Committees 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 Na		ı aye y
Old National E		
	d Organization, Affiliated Committee, Joint Fundraising Representative	ve, or Leadership PAC Sponsor
Old National Bank		,
Old Ivational Bank		
Mailing Address	1 Main St.	
	Evansville IN STATE	47708-1464
Relationship: 🗶 Connec	cted Organization Affiliated Committee Joint Fundraising Represe	ntative Leadership PAC Sponsor
. Custodian of Records: I books and records.	dentify by name, address (phone number optional) and position of the	e person in possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
Treasurer: List the name any designated agent (e.g.)	and address (phone number optional) of the treasurer of the committee., assistant treasurer).	ee; and the name and address of
Full Name Geibel, of Treasurer	Tim, , ,	
Mailing Address	1 Main St.	
	Evansville IN	47708-1464
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	812 464 1228

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Full Name of Designated G Agent	Geibel, Tim, , ,		
Mailing Address	1 Main St.		
	Evansville CITY	IN STATE	47708-1464 ZIP CODE
Title or Position Treasurer		mber 5	312 - 464 - 1228
safety deposit boxes Name of Bank, Dep	epositories: List all banks or other depositories in which the commits or maintains funds. pository, etc. Old National Bank	ttee deposits	funds, holds accounts, rents
Mailing Address	1 Main St.		
	Evansville	IN	47708
	Evansville	IN	2IP CODE
Name of Bank, Dep	CITY		
Name of Bank, Dep	CITY	STATE	
Name of Bank, Dep	CITY cository, etc.	STATE	
L	CITY cository, etc.	STATE	
L	CITY cository, etc.	STATE	