Image# 202311189599162341			_	PAGE 1 / 4 -
FEC FORM 1	STATEME ORGANIZ			
			O	ffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
WALLACE GILBE	RRY FOR ALABAI	MA, INC.		
ADDRESS (number and street)	PO BOX 59803			
(Check if address is changed)				
				259
	CITY 🔺		STATE ▲	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address is changed)	JANNA@CROSBYOTT.CO	DM		
	Optional Second E-Mail Ad	dress		
 (Check if address is changed) 				
	8 2023			
B. FEC IDENTIFICATION N		00857300		
3. FEC IDENTIFICATION N				
IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
certify that I have examined t	his Statement and to the best	of my knowledge and belief	it is true correct and	
Type or Print Name of Treasure	RUTLAND, JANNA, , ,			
Signature of Treasurer RUT	LAND, JANNA, , ,		Date 11	D D / Y Y Y 18 2023
NOTE: Submission of false, erron		may subject the person signin TION SHOULD BE REPORTE	-	penalties of 52 U.S.C. §301
Office Use Only		For further information Federal Election Commi Toll Free 800-424-9530	contact:	FEC FORM 1 (Revised 06/2012)

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FEC Form 1 (Revised 03/2022) Page 2 TYPE OF COMMITTEE: 5. Candidate Committee: This committee is a principal campaign committee. (Complete the candidate information below.) (a) X This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate (b) information below.) Name of GILBERRY, WALLACE, , , Candidate State AL Candidate Office REP House Senate President Party Affiliation Sought: District 02 (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (National, State (Democratic, (d) This committee is a or subordinate) committee of the Republican, etc.) Party **Political Action Committee (PAC):** This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a: (e) Corporation w/o Capital Stock Labor Organization Corporation 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 party 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.)

(g)	This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	

(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

(g)

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (i) committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (j) committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser С 1. С 2.

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	FEC Form 1 (Revised 02	2/200	09)																											Pa	ge	3		
٧	Write or Type Committee Name																																	
	WALLACE GILB	ER	R.	Y	FC	DF	R A	۱L	A	B	A	M	A	, I	Ν	C	•																	
6.	Name of Any Connected Or	gani	zati	on,	Aff	ilia	ted	Co	omn	nitl	tee	, J	oin	t F	un	dra	isiı	ng	Rep	ores	sen	tat	ive	, 01	r Lo	eac	der	shi	p F	PAC	s	por	iso	r
	Mailing Address																																	
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								0		Y										ę	STA	ΤE						Z	IP	со	DE			

Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Sponsor

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	PO BOX 59803
	BIRMINGHAM
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
	Telephone number

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	PO BOX 59803							
	BIRMINGHAM							
	CITY ▲ STATE ▲ ZIP CODE ▲							
Title or Position ▼								
TREASURER								

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Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A	ZIP CODE
Title or Position ▼		
	Telephone number	-

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.

Mailing Address	1445-A LAUGHLIN AVENUE		
		VA 2210	
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, I			
Mailing Address			
	CITY ▲	STATE 🔺	ZIP CODE ▲