**FEC** 

Only

# STATEMENT OF

PAGE 1 / 19

**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) America's Electric Cooperative PAC - Oklahoma 2325 E I-44 Service Rd ADDRESS (number and street) (Check if address is changed) Oklahoma City OK 73111 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address jreese@oaec.coop is changed) Optional Second E-Mail Address cmeyers@oaec.coop COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00133561 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. Type or Print Name of Treasurer Reese, Jim, , Date 04 12 2024 Signature of Treasurer Reese, Jim, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate 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 can information below.)	ndidate
Name of Candidate	
Candidate	State
Party Affiliation Sought: House Senate President	istrict
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republican, etc.)	Party
Political Action Committee (PAC):	
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected org	janization is a:
Corporation Corporation w/o Capital Stock Labor Organization	zation
Membership Organization X 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 function committee. (i.e., nonconnected committee)	d or party
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:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mor committees/organizations, at least one of which is an authorized committee of a federal candidate.	re political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mor committees/organizations, none of which is an authorized committee of a federal candidate.	re political
Committees Participating in Joint Fundraiser	
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Dir. of Gov. & Leg.

	FEC <b>Form 1</b> (Revised 0)	2/2009)		
V	Vrite or Type Committee Name	12000)		. ago 🗸
	America's Electri	c Cooperative PAC - Oklahoma		
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Rep		-
	Mailing Address	4301 WILSON BLVD		
		ARLINGTON	VA 22203	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization Joint Fundraising	ng Representative	Leadership PAC Spons
7.	Custodian of Records: Identification books and records.	fy by name, address (phone number optional) and position	n of the person in posses	ssion of committee
	Reese, Jim	· , ,		
	Mailing Address	PO Box 54309		
		Oklahoma City	OK 73154	
	<b>-</b>	CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼   DIR. OF GOV AFFAIRS	Telephone nu	umber 405 - [	365 0932
8.	Treasurer: List the name and any designated agent (e.g., a	l address (phone number optional) of the treasurer of the ssistant treasurer).	ne committee; and the i	name and address of
	Full Name Reese, Jim of Treasurer	.,, 	1 1 1 1 1 1 1 1	
	Mailing Address	PO Box 54309		
		Oklahoma City	OK 73154	
	Title or Position ▼	CITY A	STATE ▲	ZIP CODE ▲

405

Telephone number

365

0932

FEC Form 1 (Revised C	02/2009)		Page <b>4</b>
Full Name of Designated Agent		1 1 1 1 1 1	
Mailing Address			
Title or Position <b>▼</b>	CITY ▲ ST	TATE A	ZIP CODE ▲
	Telephone numbe	r	
Banks or Other Depositorion safety deposit boxes or main	es: List all banks or other depositories in which the committee of tains funds.	leposits funds, holds	accounts, rents
Name of Bank, Depository, e	etc.		
Bank of	Oklahoma		
Mailing Address	PO Box 24128		
	Oklahoma City	OK 73124	
	CITY ▲ ST	ATE A	ZIP CODE ▲
Name of Bank, Depository, e	etc.		
Mailing Address			
	CITY ▲ ST.	ATE ▲	ZIP CODE ▲

Page	of <sup>19</sup>	
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h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
_	Organization, Affiliated Committee, Joint Fun		
Mailing Address	P O BOX 608		
	BURLEY	ID	83342
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee Jo		
esignated Agent: Identi	y by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address	by by name, address (phone number – optional)  CITY	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name	cories: List all banks or other depositories in whice aintains funds.	Telephone Number	s funds, holds accounts, rent
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cories: List all banks or other depositories in whice aintains funds.	Telephone Number	s funds, holds accounts, rent
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cories: List all banks or other depositories in whice aintains funds.	Telephone Number	s funds, holds accounts, ren

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

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
INDIANA ACRE/INDIANA S	8888 KEYSTONE CROSSING SUITE 1600		
Relationship:	INDIANAPOLIS	IN	46240
nelationship.	CITY A	STATE A	ZIP CODE ▲
Designated Agent: Identi	ed Organization X Affiliated Committee Jo	int Fundraising Represent	ative Leadership PAC Spo
		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)		
Pesignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which anintains funds.	STATE A  Telephone Number	ZIP CODE A

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(h). <b>Joint Fundraisi</b>	ig i ai tioipailt.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
-	Organization, Affiliated Committee, Joint Fun		e, or Leadership PAC Spons
Mailing Address	509 EAST CARTHAGE		
	PO BOX 790		
Relationship:	MEADE	KS KS	67864
Helationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization X Affiliated Committee Jo  y by name, address (phone number – optional)	int Fundraising Representa	ative Leadership PAC Spo
Pesignated Agent: Identif		int Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi		int Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identif		int Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identif	y by name, address (phone number – optional)		
Pesignated Agent: Identif	y by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Spo
Pesignated Agent: Identing Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
Pesignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification  Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.	STATE A  Telephone Number	ZIP CODE A

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h). <b>Joint Fundraisir</b>	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
<u> </u>			
Mailing Address	P.O.BOX 32170		
Mailing Address			
	LOUISVILLE	KY	40232
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization X Affiliated Committee Joy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
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esignated Agent: Identif	y by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in while aintains funds.	STATE A  Telephone Number	ZIP CODE A

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	ng Participant:		
1.		FEC ID number	С
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3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	, or Leadership PAC Spon
LOUISIANA ACTION	N COMMITTEE FOR RURAL ELECTRIFICA	TION	
Mailing Address	10725 AIRLINE HWY		
	BATON ROUGE	LA LA	70816
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number - optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	CITY ▲  CITY ▲  pries: List all banks or other depositories in which taintains funds.	elephone Number	s funds, holds accounts, rent
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	CITY ▲  CITY ▲  pries: List all banks or other depositories in which taintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in which taintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in which taintains funds.	Telephone Number	s funds, holds accounts, rent

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	ng Participant:		
1.		FEC ID number	С
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-	d Organization, Affiliated Committee, Joint Fund RGY ACTION TEAM (GREAT)	draising Representative,	or Leadership PAC Spons
	1 12300 ELM CREEK BLVD		
Mailing Address			
	MAPLE GROVE	MN MN	55369
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number - optional)		
resignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name	CITY A	1	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	CITY ▲  ories: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address  TITLE OR POSITION	CITY ▲  CITY ▲  Ories: List all banks or other depositories in which anintains funds.	Telephone Number	funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Lanks or Other Deposite afety deposit boxes or management of Bank,	CITY ▲  CITY ▲  Ories: List all banks or other depositories in which anintains funds.	Telephone Number	funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Lanks or Other Deposite afety deposit boxes or make the property of the position of the positio	CITY ▲  CITY ▲  Ories: List all banks or other depositories in which anintains funds.	Telephone Number	funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Lanks or Other Deposite afety deposit boxes or make the property of the position of the positio	CITY ▲  CITY ▲  Ories: List all banks or other depositories in which anintains funds.	Telephone Number	funds, holds accounts, rents

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h). <b>Joint Fundrais</b> i	•		
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-	d Organization, Affiliated Committee, Joint Fun		
	ANTIVES OF MISSISSIF FIXEFIELD SOME		
Mailing Address	POST OFFICE BOX 3300		
	RIDGELAND	MS MS	39158
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee Joi	int Fundraising Represent	Leadership PAC Sp
		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		int Fundraising Representa	Leadersnip PAC Sp
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esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which naintains funds.	STATE A Telephone Number	ZIP CODE A
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esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which naintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which naintains funds.	STATE A  Telephone Number	ZIP CODE A

Page	of <sup>19</sup>	

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d Organization, Affiliated Committee, Joint	Fundraising Bonrosontativ	e or Leadership PAC Spans
	I dilutaising hepresentativ	e, or Leadership TAO Spons
PO Box 1306		
Great Falls	MT	59403
CITY ▲	STATE A	ZIP CODE ▲
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CITY A	QT∆TF ▲	ZIP CODE ▲
N ▼	SIAIL	
	Great Falls  CITY   ed Organization   Affiliated Committee  ify by name, address (phone number – option	PO Box 1306  Great Falls  CITY A STATE A  STATE A  CITY A STATE A  STATE A  CITY A STATE A

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4.				FEC ID	number	С
				_		
	_		liated Committee, Joint RATIVE POLITICAL AC			or Leadership PAC Spons
Ма	iling Address	1717 E INTERS	TATE AVE			
		BISMARCK		, , , , <b>,</b> ,	ND	58503-0542
Rel	lationship:		CITY ▲		STATE A	ZIP CODE ▲
Full N	Jama					
ı un ı	varrie					
	ng Address					
Mailir			CITY A	S.	TATE A	ZIP CODE A

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(h). <b>Joint Fundrais</b>			
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4.		FEC ID number	С
lame of Any Connecte	d Organization, Affiliated Committee, Joint Fu	ındraising Representativ	e, or Leadership PAC Spons
OHIO ACTION COMMITTEE FO	R RURAL ELECTRIFICATION (ACRE)/OHIO RURAL ELECTRIC CC	OPERATIVES, INC./NATIONAL RUR	RAL ELECTRIC COOPERATIVE ASSOCIA
Mailing Address	6677 BUSCH BOULEVARD		
	COLUMBUS	OH	43229
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee	loint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
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esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional		
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional	STATE A	
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional limits)  CITY   CITY   Cories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO Anks or Other Depositatety deposit boxes or research.	ify by name, address (phone number – optional limits)  CITY   CITY   Cories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional CITY A  CITY A  cories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO  anks or Other Depositatety deposit boxes or related to the position of Bank,	ify by name, address (phone number – optional CITY A  CITY A  cories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	ZIP CODE A  ts funds, holds accounts, rent
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO  anks or Other Deposit afety deposit boxes or relame of Bank, epository, etc.	ify by name, address (phone number – optional CITY A  CITY A  cories: List all banks or other depositories in whenaintains funds.	STATE  Telephone Number  iich the committee deposit	ZIP CODE A  ts funds, holds accounts, rent
esignated Agent: Ident Full Name  Mailing Address  TITLE OR POSITIO  anks or Other Deposit afety deposit boxes or reame of Bank, epository, etc.	ify by name, address (phone number – optional CITY A  CITY A  cories: List all banks or other depositories in whenaintains funds.	STATE  Telephone Number  iich the committee deposit	ZIP CODE A  ts funds, holds accounts, rent

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	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connector	l Organization, Affiliated Committee, Joint Fu	ndraining Poprocentative	or Londorphin DAC Spans
-	COOPERATIVE INC PAC	ilulaisiiig hepreseiltauve	. Of Leadership FAC Sports
Mailing Address	2790 WAGENER ROAD		
	PO BOX 417		
Relationship:	AIKEN CITY A	STATE A	29802 ZIP CODE ▲
riolationomp.		SIAIL	ZIF CODE A
Full Name	1		
Full Name   _   _   _   _   _			
			ZIR CODE A
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A	STAT	
Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	s funds, holds accounts, ren
Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the second process of	ories: List all banks or other depositories in what intains funds.	STATE   Telephone Number  ich the committee deposit	s funds, holds accounts, rents
Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	ories: List all banks or other depositories in what intains funds.	STATE   Telephone Number  ich the committee deposit	s funds, holds accounts, rents

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		FEC ID number  FEC ID number  FEC ID number  FEC ID number	C C C
3. 4. Name of Any Connected		FEC ID number	С
A. Name of Any Connected			
Name of Any Connected		FEC ID number	С
Name of Any Connected			
DED.(E) E) ( E) E OTD	Organization, Affiliated Committee, Joint I	Fundraising Representative	e, or Leadership PAC Sponsor
BERKELEY ELECTR	IC COOPERATIVE, INC. EMPLOYEE F	PAC	
Mailing Address	P.O. BOX 1234		
	MONCKS CORNER	SC	29461
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Commented	I Organization X Affiliated Committee	Joint Fundraising Representa	ative Leadership PAC Spons
Full Name			<u> </u>
Mailing Address		1 1 1 1 1 1 1 1 1	<u> </u>
	1		
TITLE OR POSITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
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(g) or (h). <b>Joint Fundraisin</b>	g Participant:		
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2		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
. Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	nising Representative	e, or Leadership PAC Sponsor
WYOMING RURAL E	ELECTRIC ASSOCIATION PAC		
Mailing Address	2312 CAREY AVENUE		
			<u>                                     </u>
	CHEYENNE	WY	82001
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
Connected	d Organization X Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC Sponsor
. Designated Agent: Identify	y by name, address (phone number - optional)		
Full Name			
Mailing Address			
	I		1
TITLE OR POSITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
IIILE OR POSITION	1	ephone Number	-   -
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Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which taintains funds.	he committee deposit	s funds, holds accounts, rents
Name of Bank,			
Depository, etc.			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

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Page	of	13	

h). <b>Joint Fundrais</b> i	•		
1.		FEC ID number	С
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		•	
-	d Organization, Affiliated Committee, Joint Fu		e, or Leadership PAC Spon
MISSOURI ELECTF	RIC COOPERATIVES POLITICAL ACTION	COMMITTEE	
Mailing Address	2722 EAST MCCARTY STREET		1 1 1 1 1 1 1 1 1 1
	JEFFERSON CITY	, , , , MO	65101
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident	ed Organization X Affiliated Committee J  fy by name, address (phone number – optional)		Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Ident			Leadership PAC Sp
esignated Agent: Ident			Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in white naintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank,	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in white naintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in white naintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in white naintains funds.	STATE A  Telephone Number	ZIP CODE A

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

Page \_\_\_\_ **of** \_\_\_\_

(h). Joint Fundrais	•		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Oklahoma Associati	on of Electric Cooperatives		
Mailing Address	2325 E. I-44 Access Road		
	Oklahoma City	OK	73111
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
X Connect	ed Organization Affiliated Committee	loint Fundraising Represent	ative Leadership PAC Spo
X Connect			ative Leadership PAC Spo
X Connect  Designated Agent: Ident			ative Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name			ative Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name			ative Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	ify by name, address (phone number – optional		Leadership PAC Spo
Designated Agent: Ident Full Name Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional		
Designated Agent: Ident Full Name Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional	STATE A Telephone Number	ZIP CODE A
Designated Agent: Ident Full Name Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional  CITY   Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Designated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Cafety deposit boxes or not be safety deposit boxes or not be safety.	ify by name, address (phone number – optional CITY ▲  CITY ▲  ories: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Designated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be because of Bank, Depository, etc.	ify by name, address (phone number – optional CITY ▲  CITY ▲  ories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	ZIP CODE A
Designated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Cafety deposit boxes or not be safety deposit boxes or not be safety.	ify by name, address (phone number – optional CITY ▲  CITY ▲  ories: List all banks or other depositories in whaintains funds.	STATE A  Telephone Number	ZIP CODE A
Designated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Banks or Other Deposit safety deposit boxes or not be because of Bank, Depository, etc.	ify by name, address (phone number – optional CITY A  CITY A  ories: List all banks or other depositories in what intains funds.	STATE A  Telephone Number  ich the committee deposi	ZIP CODE A