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FEC FORM 1

Office

Use

Only

STATEMENT OF ORGANIZATION

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FEC FORM 1

(Revised 06/2012)

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	FEC MAIL CENTER
Modern Woodmen of Am	erica Political Ac	ction Committee		
	<u> </u>	1111111		
ADDRESS (number and street)	1701 1st Avenue	111111111		
(Check if address	1			
is changed)	Rock Island		IL STATE A	61201 ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRES	ss			
(Check if address is changed)	Melanie Raischel	modern-woodmen.org		
	Optional Second E-Mail Add	fress		
				
COMMITTEE'S WEB PAGE ADD	RESS (URL)		<i>:</i>	
(Check if address is changed)				
3. FEC IDENTIFICATION NU	- · · · ·	0 1 8 4 3 2		
4. IS THIS STATEMENT	NEW (N) OR	X: AMENDED (A)		
I certify that I have examined thi	s Statement and to the best	of my knowledge and belief it	is true, correct a	and complete.
Type or Print Name of Treasurer	Melanie R. Raisch	nel		
Signature of Treasurer 2	Value 1216	audil	Date 0 4	04 2014
NOTE: Submission of false, errone	ous, or incomplete information	may subject the person signing t	his Statement to t	he penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

PEC F	orm 1 (Hevised 02/2009)
	COMMITTEE
Candidat	e 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.)
Name of Candidate	
Candidate Party Affilia	Office State tion Sought: House Senate President
	District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	
(d)	(National, State (Democratic, This committee is a crawful subordinate) committee of the Republican, etc.) Party.
Political /	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
•	Corporation Wo 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 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.)
Joint Fun	draising Representative:
(g) ·	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizælons, at least one of which is an authorized committee of a federal candidate.
(h) ""	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Con	nmittees Participating in Joint Fundraiser
	(The state of t
1.	
2.	FEC ID number C
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	FEC Forn	n 1 (Revised	DŻ/2009)	Page 3
-w	rite or Type Co			
6.	Name of Any	Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	lership PAC Sponsor
,				111111
_	<u> </u>	<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>
L				
	Mailing Addres	s		
			CITY STATE	ZIP CODE
	Relationship:	Connecte	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
				
7.	Custodian of books and reco		ntify by name, address (phone number optional) and position of the person in	possession of committee
	Full Name	للللا		
	Mailing Addres	s		
				111111
	Title or Position	n	CITY STATE	ZIP CODE
	سس		Telephone number	L
8.	Treasurer: List any designated	the name ar agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
	Full Name of Treasurer			
	Mailing Address	s		
				-
	Tille ou Produ		CITY STATE	ZIP CODE
	Title of Position	1 	Telephone number	1 !-!

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Full Name of Designated Jain Agent	ne L. Edmondson			
Mailing Address	1701 1st Avenue			
	Rock Island	STATE	61201	
Title or Position Supervisor, Ge	CITY eneral Accounting , Telepho	STATE	zip code , 9 - [7, 8, 6] - [6, 4, 8, 1]	
Banks or Other Depos safety deposit boxes or Name of Bank, Deposito		committee deposits fu	nds, holds accounts, rents	
ـــــا		<u> </u>		
Mailing Address				
		ليا ل		
	CITY	STATE	ZIP CODE	
Name of Bank, Deposito	ory, etc.			
٠ ــــا		 		
Mailing Address			1 1 1 1 1 1 1 1 1	
	CITY	STATE	ZIP CODE	
		-		

Modern Woodmen ? FRATERNAL FINANCIAL

Legal Department Modern Woodmen of America 1701 1st Avenue Rock Island, IL 61201

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(ACC) PRÉPARER	4/15/14 DATE PREPARED

(8/2013)