Image# 12950657413 PAGE 1 / 4

FEC FORM 1			EMEN ANIZA						Off	ice Use	e Only			
NAME OF COMMITTEE (in	n full)	(Check is change	if name ged)	Example over the	e:If typing lines.	, type	121	FE4M						
PARKER (GRIFF	ITH FOR	CON	GRES	S									
ADDRESS (number a	nd street)	101 LOWE AVE	SE											
(Check if a		STE 3A												Ш
is changed))	HUNTSVILLE					AL		3580)1 		- 🗀		
			(CITY			STAT	E		Z	IP C	ODE		
COMMITTEE'S E-MA	AIL ADDRES	S (Please provid info@parkergri	-		s)									
(Check if is change						1 1 1								
COMMITTEE'S WEB (Check if is change	address	RESS (URL) www.parkergriff	ithforcongres	s.com										
2. DATE 0	1 / 12	2012												
3. FEC IDENTIFIC	CATION NU	MBER	C co	0509372										
4. IS THIS STATE	MENT X	NEW (N)	OR		AMENDI	ED (A)								
I certify that I have of	examined thi	s Statement and	to the best	of my knov	vledge an	d belief i	it is true	, corre	ct and	сотр	lete.			
Type or Print Name	of Treasurer	AMY GARRISO	ON											
Signature of Treasure	<i>AMY GA</i> er	RRISON		[El	ectronicall <u></u>	y Filed]	Date	0	м / 1	12	D /	Y	y y y 2012	Y
NOTE: Submission of		ous, or incomplete								penaltie	es of	2 U.S.	.C. §4	37g.
		I	1											

Office Use Only					For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
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TYPE OF COMMITTEE Candidate Committee:
Candidate Committee:
(a) X 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 ROLF PARKER GRIFFITH Jr.
Candidate Party Affiliation REP Office Sought: House Senate President District AL AL District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate
Party Committee:
(National, State (Democratic, 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 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 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 Fundraising Representative:
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, 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.
committees/organizations, none of which is an authorized committee of a federal candidate.
committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser

FEC ID number C

FEC Form 1 (Re	vised 02/2009)		Page 3
Write or Type Committee	Name		
PARKER GI	RIFFITH FOR CONG	RESS	
6. Name of Any Conne	cted Organization, Affiliated Committee,	Joint Fundraising Representat	ive, or Leadership PAC Sponsor
NONE			
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Cor	nnected Organization Affiliated Committe	ee Joint Fundraising Repres	entative Leadership PAC Sponsor
 Custodian of Record books and records. 	s: Identify by name, address (phone numb	er optional) and position of th	e person in possession of committee
I	Y GARRISON		
Full Name	101 LOWE AVE SE		
Mailing Address	STE 3A		
	HUNSTVILLE		35801
Title or Position	CITY	STATE	ZIP CODE
TREASURER		Telephone number	256 - 533 - 0216
	me and address (phone number optiona (e.g., assistant treasurer).	l) of the treasurer of the commit	tee; and the name and address of
Full Name AMN of Treasurer	/ GARRISON		
Mailing Address	101 LOWE AVE SE		
	STE 3A		
	HUNSTVILLE	AL	35801
Title or Position	CITY	STATE	ZIP CODE
TREASURER		Telephone number	256 533 - 0216

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit b	or Depositories : List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.	
safety deposit to Name of Bank,	Depository, etc. SERVISFIRST BANK 1401 MERIDIAN STREET	
safety deposit b	Depository, etc. SERVISFIRST BANK 1401 MERIDIAN STREET	
safety deposit to Name of Bank,	Depository, etc. SERVISFIRST BANK 401 MERIDIAN STREET	
safety deposit to Name of Bank,	Depository, etc. SERVISFIRST BANK 401 MERIDIAN STREET STE 100	D1
safety deposit to Name of Bank, Mailing Address	Depository, etc. SERVISFIRST BANK 401 MERIDIAN STREET STE 100 HUNTSVILLE AL 3580	
safety deposit to Name of Bank, Mailing Address	Depository, etc. SERVISFIRST BANK 401 MERIDIAN STREET STE 100 HUNTSVILLE CITY STATE	
safety deposit to Name of Bank, Mailing Address	Depository, etc. SERVISFIRST BANK 401 MERIDIAN STREET STE 100 HUNTSVILLE CITY STATE	
safety deposit to Name of Bank, Mailing Address	Depository, etc. SERVISFIRST BANK 401 MERIDIAN STREET STE 100 HUNTSVILLE CITY STATE Depository, etc.	
safety deposit to Name of Bank, Mailing Address Name of Bank,	Depository, etc. SERVISFIRST BANK 401 MERIDIAN STREET STE 100 HUNTSVILLE CITY STATE Depository, etc.	
safety deposit to Name of Bank, Mailing Address Name of Bank,	Depository, etc. SERVISFIRST BANK 401 MERIDIAN STREET STE 100 HUNTSVILLE CITY STATE Depository, etc.	