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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. PARKER GRIFFITH FOR CONGRESS 101 LOWE AVE SE ADDRESS (number and street) STE 3A (Check if address is changed) HUNTSVILLE 35801 CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) griffith@redcurve.net (Check if address X is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) www.parkergriffithforcongress.com (Check if address is changed) DATE 02 24 2012 C00509372 FEC IDENTIFICATION NUMBER X IS THIS STATEMENT **OR** 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. AMY GARRISON Type or Print Name of Treasurer AMY GARRISON [Electronically Filed] 02 24 2012 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
ı	Use			Federal Election Commission	
ᆫ	Only			Toll Free 800-424-9530	(Revised 02/2009)

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

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Write or Type Committee N	ame	
PARKER GRI	FFITH FOR CONGRESS	
6. Name of Any Connecte	d Organization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STA	TE ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
7. Custodian of Records: books and records.	dentify by name, address (phone number optional) and position of	the person in possession of committee
I	LEY T CRATE	
Full Name	,138 CONANT STREET	
Mailing Address		
	BEVELRY	A , ,01915
	BEVELKT	
Title or Position	CITY STATI	E ZIP CODE
ASST. TREASURER	Telephone number	617 848 - 8887
8. Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the comm g., assistant treasurer).	nittee; and the name and address of
Full Name AMY G of Treasurer	ARRISON	
Mailing Address	101 LOWE AVE SE	
	STE 3A	
	HUNSTVILLE	
Title or Position	CITY STATE	ZIP CODE
TREASURER	Telephone number	256 533 0216

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Full Name of Designated	BRADLEY	T CRATE		
Agent Mailing Address		138 CONANT STREET		
Mailing Address		1		
		DEVEL DY	, , MA , , 0	1015
		BEVELRY	STATE	1915
Title or Position ASST. TREASU	JRER		elephone number 617	_ 848 8887
Banks or Other safety deposit be	r Depositorie	s: List all banks or other depositories in which	the committee deposits fund	s, holds accounts, rents
Name of Bank,				
	SERVIS	SFIRST BANK		
Mailing Address		SFIRST BANK 401 MERIDIAN STREET		
Mailing Address				
Mailing Address		401 MERIDIAN STREET	AL 3	5801
Mailing Address		401 MERIDIAN STREET STE 100	AL 3 STATE	5801 ZIP CODE
		401 MERIDIAN STREET STE 100 HUNTSVILLE CITY		
	Depository, e	401 MERIDIAN STREET STE 100 HUNTSVILLE CITY		
Name of Bank,	Depository, e	401 MERIDIAN STREET STE 100 HUNTSVILLE CITY		
Mailing Address Name of Bank, Mailing Address	Depository, e	401 MERIDIAN STREET STE 100 HUNTSVILLE CITY tc. BRIDGE BANK NA		
Name of Bank,	Depository, e	401 MERIDIAN STREET STE 100 HUNTSVILLE CITY tc. BRIDGE BANK NA	STATE	