SMITH, ANDERSON, BLOUNT, DORSETT, MITCHELL & JERNIGAN, L.L.P.

RECEIVED FEC MAILCENTER

LAWYERS

2022 JUN 13 PM 9: 45

OFFICES Wells Fargo Capitol Center 150 Fayetteville Street, Suite 2300 Raleigh, North Carolina 27601

June 7, 2022

MAILING ADDRESS P.O. Box 2611 Raleigh, North Carolina 27602-2611

TELEPHONE: (919) 821-1220 FACSIMILE: (919) 821-6800

WILLIAM W. NELSON DIRECT DIAL: (919) 821-6760 E-Mail: wnelson@smithlaw.com

<u>VIA CERTIFIED MAIL</u> RETURN RECEIPT REQUESTED (70123460000081841113)

Federal Election Commission 1050 First Street, N.E. Washington, DC 20463

Re: Virginia Peanut Growers Association, Inc. and North Carolina Peanut Growers

Association, Inc. Political Action Committee, Inc.

Dear Sir or Madam:

Enclosed please find a Form 1 which I am submitting on behalf of the political action committee named above.

Best regards.

Yours sincerely,

William W. Nelson

mm nkel-

WWN:seh Enclosure

cc: Ms. Ashley Collins

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAILCENTER

						Office Use		
	NAME OF COMMITTEE (in full)		(Check if name is changed)	Example: If typing, type over the lines.	12FE41		13 PK	9: 45
VIR	GINIA PEANŲT GRO	OWERS ASS	QCIĄTION, IŅC. _I AŅI	O NORTH ÇAROLINA PEANUT	GROWERS	ASSOCIATION	Į, IŅC. _I PQI	LITICAL
[AÇ]	ГІРИ СРИМІТТЕЕ,	IŅC. _I (VĮRĢII	NIA CAROLINA PEA	NUT GROWERS ASSOCIAT	ION _L PAC)	<u> </u>		أحلا
ADD	RESS (number and str	reet) [103	TRIANGLE COURT	r, , , , , , , , , , , , , , , , , , ,		1 1 1 1	<u> </u>	
	(Check if addre	ess PO	BOX 8		_11_	<u> </u>		
COM	o inanges,	Įnas	CITY		[NC] STATE	27 ₁ 856	ZIP CODE	
	MITTEE'S E-MAIL A	DDRESS	,					
	(Check if addre	ess [ash	lęy.collins@aboutp	eanuts,com		<u> </u>		
	- · · · · · · · · · · · · · · · · · · ·	Optio	nal Second E-Mail A	ddress				
3		<u></u>		1.				
) COM	MMITTEE'S WEB PAG (Check if addre is changed)		(URL)			<u> </u>		
	, .	L			1 1 1		 	
	DATE 06	01	2022					
3.	FEC IDENTIFICATION	ON NUMBER	· C					
4.	IS THIS STATEMENT	r 🔀 N	EW (N) OR	AMENDED (A)				,
I cer	tify that I have exami	ined this State	ement and to the bes	st of my knowledge and belief	it is true, corr	ect and comple	te.	
Туре	or Print Name of Tre	easurer AS	SHLEY COLLINS					
Siana	ature of Treasurer	Ashler	Collins		Date	7 / 18	20	/√-√ -√- 122

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 Use Only		For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 06/2012)



		OMMITTEE • 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.)			
	ne of didate				
	didate y Affiliatio	Office State On Sought: House Senate President District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	ne of didate				
Par	ty Con	nmittee: (National, State (Democratic,			
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.			
Pol	itical A	ction Committee (PAC):			
(e)	\times	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 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 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.)			
	at Fund	Iraising 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)	П	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.				
	Com	mittees Participating in Joint Fundraiser			
	1.	FEC ID number C			
	2.	FEC ID number			
	3.	FEC ID number			
	4.				

Write or Type Committee Name

6. Name of Any Conn	ected Organization, Affiliated Committee, Joint Fu	ndraising Representative,	or Leadership PAC Sponsor
NORTH CAROL	NA PEANUT GROWERS ASSOCIAT	FION, INC.	
Mailing Address	103 TRIANGLE COURT		
	PΦ BOX 8		
	NASHV(LLE	NÇ	27856,
	CITY	STATE	ZIP CODE
Relationship: 🔀 Co	onnected Organization Affiliated Committee Jo	oint Fundraising Representa	tive Leadership PAC Sponso
Custodian of Record books and records.	ds: Identify by name, address (phone number option	onal) and position of the po	erson in possession of committee
Full Name AS	SHLEY COLLINS		
Mailing Address	P.O. BOX 8		
	103 TRIANGLE COURT		
	NASHVILLE	INÇ	27,856
Title or Position	CITY	STATE	ZIP CODE
TREASURER		Telephone number	
	ame and address (phone number optional) of the tile.g., assistant treasurer).	reasurer of the committee;	and the name and address of
Full Name of Treasurer AS	SHLEY COLLINS		
Mailing Address	P.O. BOX 8		
	103 TRIANGLE COURT		
	NASHVILLE CITY	INC STATE	27,856
Title or Position	ı	Telephone number	



Full Name of Designated Agent	THOMAS R. COTTON, JR		
Mailing Address	IPO Box 59		
	1001,CAMPBELL AVE		
	FŖĄŅKĻĬN, , , , , , , , , , , , , , , , , , ,	VA STATE	23851 ZIP CODE
Title or Position			
ASSISTANT TI	REASURER Telephone	number 1	
	Depositories : List all banks or other depositories in which the compxes or maintains funds. Depository, etc.	mittee deposits fun	ds, holds accounts, rents
	SOUTHERN BANK AND TRUST COMPANY		
Mailing Address	209 SOUTH BARNES STREET		
	NASHVILLE , , , , , , , , , , , , , , , , , ,	NC	27,856
	CITY	STATE	ZIP CODE
Name of Bank,	Depository, etc.		
	1		1
Mailing Address			
	CITY .	STATE	ZIP CODE

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FEC Form 1S (Revised 02/2017)

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

Page	of	

5(g	or(h). Joint Fundraising	Participant:	
	1		FEC ID number
	2.		FEC ID number
	3.		FEC ID number
	4.		FEC ID number
6. 2 0 2 2	·	IT GROWERS, ASSOCIATION, INC.	1
2		1	
0 6	Mailing Address	PO Box 59	
		1001 Campbell Avenue	
1		Franklin	VA 23851
	Relationship:	CITY	STATE ZIP CODE
3	Connected	Organization Affiliated Committee oint	Fundraising Representative Leadership PAC Sponsor
0M-0040&4b1	Designated Agent: Identify	by name, address (phone number – optional)	
15	Mailing Address		
7			
	TITLE OR POSITION	CITY	STATE ZIP CODE
			ephone Number
9.	safety deposit boxes or mai		he committee deposits funds, holds accounts, rents
	Name of Bank, Depository, etc.		
	Mailing Address		
		CITY	STATE ZIP CODE

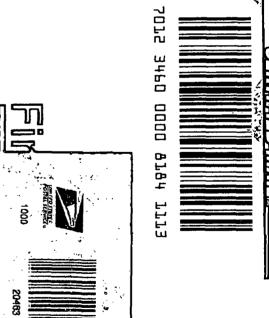
SMITH ANDERSON

Wells Fargo Capitol Center, Suite 2300 150 Fayetteville Street Post Office Box 2611 Raleigh, North Carolina 27602-2611

1050 First Street, N.E. Washington, DC 20463 Federal Election Commission

SOSS JUNIS PH 9: 45

2022-06-1M-0M-00408452



Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
	Date of Receipt
Hand Delivered	
Postmarked USPS First Class Mail	Date of Receipt
LICES Degistered/Contified	Postmarked (R/C)
USPS Registered/Certified	6/7/22
USPS Priority Mail	Postmarked
	Postmarked
USPS Priority Mail Express	
Postmark Illegible	,
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busine	ess Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
Spen	6/13/22
PREPARER	DATE PREPARED
(3/2015)	