Only

STATEMENT OF

PAGE 1 / 15

FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) BNSF Railway Company RAILPAC (BNSF RAILPAC) P.O. Box 961039 ADDRESS (number and street) (Check if address is changed) Fort Worth 76161 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address erika.hartingh@bnsf.com is changed) Optional Second E-Mail Address fecinfo@pass1.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00235739 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 Hartingh, Erika,, 80 14 2025 Signature of Treasurer Hartingh, Erika, , , Date 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

C Form	1 (Revised 03/2022)	Page 2
TYPE C	OF COMMITTEE:	
Candid	late 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. (Complinformation below.)	ete the candidate
Name Candid		
Candid Party	date Office Affiliation Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate	
(d)	This committee is a (National, State (Demo	ocratic, olican, etc.) Party
Politica	al Action Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is
	X Corporation Corporation w/o Capital Stock La	bor Organization
		operative
	X In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee)	regated fund 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 (Hybridian committee)	orid PAC).
	In addition, this committee is a Lobbyist/Registrant PAC.	
Joint F	Fundraising Representative:	
(i)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	· ·
(j)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Com	mittees Participating in Joint Fundraiser	
1.	C	

Treasurer

	-				
	FEC Form 1 (Revised 0)	2/2009)			Page 3
V	Vrite or Type Committee Name				
	BNSF Railway C	company RAILPAC (BNS	SF RAILPAC	C)	
6.	Name of Any Connected Or	rganization, Affiliated Committee, Joint	Fundraising Repre	sentative, or I	_eadership PAC Sponsor
	BNSF Railway Comp	any 			
	Mailing Address	P.O. Box 961039			
		Fort Worth		TX _	76161
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: X Connected	Organization Affiliated Organization	Joint Fundraising	Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number option	onal) and position of	f the person in p	oossession of committee
	Hartingh, E	rika, , ,			
		500 New Jersey Ave., NW, Suite 550			
	Mailing Address				
		Washington		DC	20001
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Custodian of Records		Telephone num	ber 202	661 0445
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	he treasurer of the	committee; and	d the name and address of
	Full Name Hartingh, E	rika, , ,			
	of Treasurer				
	Mailing Address	500 New Jersey Ave., NW, Suite 550			
		Washington		DC L	20001
	Title or Position	CITY ▲		STATE ▲	ZIP CODE ▲

202

Telephone number

661

0445

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent	Garcia, Sandra, , ,	
Mailing Address	2500 Lou Menk Drive	
	Fort Worth TX	76131
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
Assistant Treasur		7 352 - 2326
	Depositories: List all banks or other depositories in which the committee deposits fur ses or maintains funds.	nds, holds accounts, rents
Name of Bank, D	epository, etc.	
	The Northern Trust Company	
Mailing Address	50 South LaSalle Street M-27	
	Chicago	60603
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DCF H Z G7 < 98 I @ 'CF' + H9 A = N5 H = CB

Form/Schedule: F1A Transaction ID:

This registration is being filed to disclose new PAC Treasurer, Custodian of Records and PAC email address.

Form/Schedule: Transaction ID:

	_	15	
Page	of	. •	

1		g Participant:				
				FEC ID	number	С
2				FEC ID	number	C
3.				FEC ID	number	C
4.				FEC ID	number	С
			ated Committee, Joint ent Fund for Federal E		esentative	, or Leadership PAC Spons
Ma	iling Address	P.O. Box 425				
		Fort Worth		1	TX	76101
Rel	lationship:		CITY A		STATE A	ZIP CODE ▲
Full N	Name					
	ng Address	1				
Mailir	ig Addiese					
Mailir	ig / taarooo					
Mailir	ig Addices					
	E OR POSITION		CITY A	S	TATE A	ZIP CODE A

Dogo	of	15	
Page	of		

h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
-	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spon
Government Employ	ees Insurance Company PAC		
Mailing Address	One GEICO Plaza		
	Washington	DC	20076
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee Jo	pint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization X Affiliated Committee Jo		ative Leadership PAC Sp
esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif			ative Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management are of Bank,	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated 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	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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	С
2.			FEC ID number	С
3.			FEC ID number	C
4.	. [FEC ID number	C
		Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
Mo	cLane Company Inc.	Federal PAC		
	Mailing Address	4747 McLane Parkway		
		Temple	, , TX ,	, 76503
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
			Fundraising Representa	
8. Desig	gnated Agent: Identify I	by name, address (phone number - optional)		
F	- ull Name			
		<u> </u>		
	Full Name			
N	Mailing Address	CITY A	STATE A	ZIP CODE A
N		1		ZIP CODE A
N	Mailing Address		STATE A	ZIP CODE A
- - -	Mailing Address	Tele	ephone Number	
9. Bank	Mailing Address	Tele es: List all banks or other depositories in which the	ephone Number	
9. Bank safety	Alailing Address TITLE OR POSITION as or Other Depositoric	Tele es: List all banks or other depositories in which the	ephone Number	
9. Bank safety	Alailing Address TITLE OR POSITION As or Other Depositoric by deposit boxes or main be of Bank,	Tele es: List all banks or other depositories in which the	ephone Number	
9. Bank safety	Alailing Address TITLE OR POSITION As or Other Depositoric by deposit boxes or main e of Bank, esitory, etc.	Tele es: List all banks or other depositories in which the	ephone Number	
9. Bank safety	Alailing Address TITLE OR POSITION As or Other Depositoric by deposit boxes or main e of Bank, esitory, etc.	Tele es: List all banks or other depositories in which the	ephone Number	

Page	of	15
i aye	O.	

1.	g Participant:				
			FEC ID numb	er C	
2.			FEC ID numb	er C	
3.			FEC ID numb	er C	
4.			FEC ID numb	er C	
Name of Any Connected	Organization, Affiliated Co	mmittee, Joint Fun	draising Represent	ative, or Lea	dership PAC Spons
MidAmerican Energy	Company PAC				
Mailing Address	666 Grand Avenue, P.O. E	Box 657			
	1		1 1 1 1 1 1 1	1 1 1 1	
	Des Moines		IA IA	503	06
Relationship:	CI	TY A	STATI		ZIP CODE ▲
Designated Agent: Identif	y by name, address (phone	number – optional)			
E II NI					
Full Name					
Mailing Address					
	CIT	Y A	STATE		ZIP CODE A
Mailing Address	CIT	1	STATE Telephone Number		ZIP CODE A

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	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
	-	rganization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
		666 Grand Avenue		
	Mailing Address	P.O. Box 657		
		Des Moines	1 IA 1	50306
1	Relationship:	CITY A	STATE A	ZIP CODE A
·	Connected (Fundraising Represent	
	Connected	organization Animated Committee Joint 1	rundraising hepresent	Leadership FAC Sponsor
8. Desig i	nated Agent: Identify b	oy name, address (phone number - optional)		
Fu	II Name			
Ma	ailing Address			
Т	ITLE OR POSITION V	CITY ▲	STATE ▲	ZIP CODE ▲
Ĺ			ephone Number	
	or Other Depositorie deposit boxes or main	es: List all banks or other depositories in which the tains funds.	he committee deposit	s funds, holds accounts, rents
	of Bank,			
	itory, etc.			
	Mailing Address			
	Mailing Address			
	Mailing Address	CITY A	STATE A	ZIP CODE A

Page	of	15	
raue	UI		

	ganization, Affiliate		FEC ID FEC ID	number number number number	C C C , or Leadership PAC Spons
Pacific Powe			FEC ID	number	C
Pacific Powe			FEC ID	number	C
Pacific Powe					
Pacific Powe			Fundraising Rep	resentative,	or Leadership PAC Spons
Pacific Powe			Fundraising Rep	resentative,	, or Leadership PAC Spons
	r/Rocky Mountair	Power PAC			
draga					
droop					
uiess	825 NE Multnomah				
L	Suite 2000 LCT				
	Portland			OR	97232
ip:		CITY A		STATE A	ZIP CODE ▲
ess					
L					
POSITION ▼		CITY A	8	STATE A	ZIP CODE ▲
			Telephone Nu	ımber 🖳	
r	ent: Identify by ress POSITION	Portland Portland Affi Connected Organization X Affi ent: Identify by name, address (pl	Portland Connected Organization X Affiliated Committee ent: Identify by name, address (phone number – option ress CITY A Connected Organization X Affiliated Committee	Portland Connected Organization X Affiliated Committee Joint Fundraising ent: Identify by name, address (phone number – optional) Position Telephone Number – Sequence of the sequence of t	Portland OR STATE ▲ Connected Organization ★ Affiliated Committee Joint Fundraising Representate ent: Identify by name, address (phone number – optional) ress CITY ▲ STATE ▲ STATE ▲ POSITION ▼

Dogo	of	15	
Page	of		

h). Joint Fundraisi			
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected NetJets, Inc. PAC	l Organization, Affiliated Committee, Joint Fo	ındraising Representativ	e, or Leadership PAC Spon
Treation in the Trace			
Mailing Address	4111 Bridgeway Avenue		
	Columbus	OH	43219
Relationship:	CITY A	STATE A	ZIP CODE ▲
	fy by name, address (phone number – optiona	Joint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optiona		Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optiona		
esignated Agent: Identification of the serious part of the serious	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in whether the state of the stat	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in whaintains 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.	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in whaintains 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.	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A

Page	of ¹⁵	
------	------------------	--

5(g) or (h). Joint Fundraising	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
6. Name of Any Connected (Organization, Affiliated Committee, Joint ction Committee	Fundraising Representativ	re, or Leadership PAC Sponsor
Mailing Address	6100 Neil Road		
. J	Debbie Florence, Asst. Treas,		
	Reno	NV	89511
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Affiliated Committee To by name, address (phone number – optic	Joint Fundraising Represen	tative Leadership PAC Sponsor
Full Name			
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE A	ZIP CODE A
TITLE OR POSITION	CITY A	STATE A Telephone Number	ZIP CODE A
	ries: List all banks or other depositories in	Telephone Number	
9. Banks or Other Depositor safety deposit boxes or main Name of Bank,	ries: List all banks or other depositories in	Telephone Number	
9. Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ries: List all banks or other depositories in	Telephone Number	

Page	of	15	
raue	OI.		

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected Lubrizol Corp Emplo	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Lubiled Corp Emplo			
Mailing Address	29400 Lakeland Boulevard		
	Wickliffe	OH	44092
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization X Affiliated Committee Jo	int Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization X Affiliated Committee Jo	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification	d Organization X Affiliated Committee Jo	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identification	d Organization X Affiliated Committee Jo	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee Jo	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identification	Affiliated Committee Jo		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Jo Jo Jo Jo Jo Jo Jo Jo Jo	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee Jo Jo Jo Jo Jo Jo Jo Jo Jo	STATE A Telephone Number	ZIP CODE A

Page	of	15	
rage	OI		

1			
2.		FEC ID number	С
		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Inner of Ame Orange to	A Communication Affiliated Community of Laint Fr	andraining Decrees which	a and and analysis DAO Consu
Flight Safety Interna	I Organization, Affiliated Committee, Joint Futional Inc. PAC	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	3100 Easton Square Place		
	Suite 100		
	Columbus	OH	43219
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number – optional)	
esignated Agent: Identi	fy by name, address (phone number – optional)	
esignated Agent: Identi	fy by name, address (phone number – optional		
esignated Agent: Identi	fy by name, address (phone number – optional		
esignated Agent: Identi			
esignated Agent: Identi	CITY	STATE A	ZIP CODE A