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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. American Bankers Association PAC (BANKPAC) 1120 Connecticut Avenue NW ADDRESS (number and street) Suite 600 (Check if address is changed) Washington 20036-3971 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS abapac@aba.com (Check if address is changed) Optional Second E-Mail Address outsourcing@aristotle.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00004275 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. Brown, Matthew, J, Mr., Type or Print Name of Treasurer Brown, Matthew, J, Mr., [Electronically Filed] 03 2022 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 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

FEC	C Form 1 (Revised 02/2009)	Page 2
	DF COMMITTEE date Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information	on below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign commit information below.)	tee. (Complete the candidate
Name of Candida		
Candida Party Af		Stateesident
(c)	This committee supports/opposes only one candidate, and is NOT an authorized com	mittee.
Name of Candida		
Party (Committee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Politic	eal Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line	6.) Its connected organization is
	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 secommittee. (i.e., nonconnected committee)	eparate segregated 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.)	
Joint F	Fundraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proce	
	committees/organizations, at least one of which is an authorized committee of a federal c	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, none of which is an authorized committee of a federal candidate.	
(Committees Participating in Joint Fundraiser	
1	1. FEC ID number	
2	2.	
,	3.	
		♪

FEC Form 1 (Revised 0	2/2009)	Page 3
Write or Type Committee Name		
American Banke	ers Association PAC (BANKPAC)	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
American Bankers Ass	ociation (ABA)	
Mallian Address	1120 Connecticut Avenue NW Suite	
Mailing Address	Ste 600	
	Washington DC	20036-3959
	CITY STATE	ZIP CODE
Relationship: X Connected	Organization Affiliated Committee Joint Fundraising Representative	e Leadership PAC Sponsor
. Custodian of Records: Identibooks and records.	tify by name, address (phone number optional) and position of the pers	on in possession of committee
Coit, Elizab	peth, B, Mrs.,	
Full Name	,1120 Connecticut Ave NW	
Mailing Address	Ste 600	
	Washington	20036-3971
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	663 5114
3. Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; ar ssistant treasurer).	nd the name and address of
Full Name Brown, Mat	thew, J, Mr.,	
Mailing Address	1120 Connecticut Ave NW	
	Washington DC CITY STATE	20036-3902
Title or Position Treasurer	ZO2	

FEC Form 1 (R	Revised 02/2009)	Page 4
Full Name of Designated Agent Wats	son, Marie, , ,	
Mailing Address	1120 Connecticut Ave NW	1
-	Ste 600	
		36-3971
	CITY STATE	ZIP CODE
Title or Position Assistant Treasurer	Telephone number 202	663 - 7514
safety deposit boxes or		nolds accounts, rents
safety deposit boxes of Name of Bank, Deposi	or maintains funds. itory, etc.	nolds accounts, rents
safety deposit boxes or	or maintains funds. itory, etc. JiSt	nolds accounts, rents
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FEC Form 1S (Revised 02/2017)

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5(g)	or(h). Joint Fundraising	g Participant:		
,	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	\Box
	4.		FEC ID number	
6.		Organization, Affiliated Committee, Joint Fundra Association PAC Inc.	aising Representative, or Leadership PAC Spons	or
	Mailing Address	1220 W. Third Street		
				Ш
		Little Rock	AR 72201-1904	
	Relationship:	CITY ▲	STATE ▲ ZIP CODE ▲	
	Connected	Organization X Affiliated Committee Joint	Fundraising Representative Leadership PAC Spo	nsor
8.		by name, address (phone number - optional)		
	Full Name			Ш
	Mailing Address			
				Ш
	TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE ▲	
		Te	elephone Number	
9.	safety deposit boxes or ma		the committee deposits funds, holds accounts, rents	
	Name of Bank, Depository, etc.			- 1
	Depository, etc.			
	Mailing Address			

FEC Form 1S (Revised 02/2017)

1				FEC ID	number	C
2				FEC ID	number	C
3.				FEC ID	number	С
4.				 FEC ID	number	C
	=	_			resentative	e, or Leadership PAC Spo
Illinois	Bankers As	sociation PAC	(Illinois BankPAC) 		
Mailir	ng Address	524 South Second	d Street		1 1 1	
		Suite 600				
		Springfield				62701-1749
			CITY A		STATE A	ZIP CODE ▲
			Affiliated Committee	Joint Fundraising	Representa	Leadership PAC S
	Connected d Agent: Identify				Representa	ative Leadership PAC S
esignated	Connected d Agent: Identify				Representa	Leadership PAC S
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FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:	FFO ID	C
	1			
	2.			C
	3.			С
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
	Mailing Address	211 Athens Way		
		Ste 100		
		Nashville	TN	37228-1381
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization X Affiliated Committee Joint F	Fundraising Representat	tive Leadership PAC Sponsor
3.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
		1		
	TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
		1	ephone Number	
).	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.	ne committee deposits	funds, holds accounts, rents
		1		
	Mailing Address			
			1 1 1	

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

h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
		FEC ID number	С
4		J	
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spor
Wyoming Banker	s Association BankPac		
	000 Facility Access		
Mailing Address	200 East 8th Avenue		
	Cheyenne	wY	82001-1440
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
	d Organization X Affiliated Committee J y by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC S
			Leadership PAC S
esignated Agent: Identif			Leadership PAC S
esignated Agent: Identif			Leadership PAC S
esignated Agent: Identif			Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)		
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or(h). Joint Fundrais i	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
	I Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
VVISCOIISIII Barike	15 ASSOCIATION WISDANNEAC		
Mailing Address	P.O. Box 8880		
	Madison	WI WI	53708-8880
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Joint F	undraising Representa	Leadership PAC Spons
Designated Agent: Identi	fy by name, address (phone number – optional)		
Mailing Address			
TITLE OF POSITION	CITY A	STATE A	
TITLE OR POSITION		ephone Number	
Banks or Other Deposit safety deposit boxes or management Name of Bank, Depository, etc.	pries: List all banks or other depositories in which the paintains funds.	ne committee deposit	s funds, holds accounts, rents
Mailing Address			

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

1	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spor
South Dakota Bar	nkers Association Public Affairs Con	nmittee (SDBANK	(PAC)
	P.O. Box 1081		
Mailing Address			
	Pierre	SD	57501-1081
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee Join	nt Fundraising Representa	ative Leadership PAC S
	v by name_address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number — optional)		
Full Name	y by name, address (phone number — optional)		
Full Name	y by name, address (phone number — optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin	1		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
North Dakota Ban	kers Association PAC		
Mailing Address	122 E Main Avenue, Suite 201		
	Bismarck	ND	58501-3889
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	ative Leadership PAC S
Connected			ative Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Faiticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
New York Banke	rs Association PAC		
	99 Park Avenue, 4th Floor		
Mailing Address			
		.	10010
	New York	NY NY	10016-
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	Leadership PAC S
	Affiliated Committee Join Join Join Join Join Join Join Join	nt Fundraising Represent	Leadership PAC S
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h). Joint Fundraisi	ng rantoipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
West Virginia Ba	nkers Association PAC		
	120 Washington Street East		
Mailing Address	120 Washington Groot Last		
	Charleston	WV	25301-1516
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Join	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC S
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraising			FEC ID num	ber C	
1.					
2.			FEC ID num		
3.			FEC ID num	ber C	
4.			FEC ID num	ber C	
=	Organization, Affiliated Com		Iraising Represer	itative, or	Leadership PAC Spor
Idaho Bankers Pol	tical Action Committe	;e 			
Mailing Address	816 W. Bannock Street				
	Suite 5A				
	Boise)	83702-5872
Relationship:	CITY	/ ▲	STA	L L E ▲	ZIP CODE ▲
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Connected	Organization X Affiliated Co	ommittee Join	nt Fundraising Repr	esentative	Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi r			
1.		FEC ID number	C
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4.		FEC ID number	С
ome of Any Connected	Organization, Affiliated Committee, Joint Fund	roising Panrosantative	o or Londorphin BAC Spor
	ague Federal PAC	raising hepresemany	e, or Leadership FAO Spor
Mailing Address	4215 Worth Ave		
	Suite 300		
	Columbus	l OH l	43219-1546
Relationship:	CITY A	STATE A	ZIP CODE A
	*** -		
	Affiliated Committee Joint by by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC S
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FEC Form 1S (Revised 02/2017) for Lines 5(g) or

n). Joint Fundraising	•	1	FEO ID =	umbar	C	
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3.			FEC ID n	umber	C	-
4.			FEC ID n	umber	C	_
	Organization, Affiliated Co		draising Repres	sentative	, or Leadership PAC S	Spon
Massachusetts Ba	nkers PAC - Federa	I Fund				
Mailing Address	One Washington Mall					
	8th Floor					
	Boston			MA	02108-	ı
Relationship:	Cl	TY 🛦	S	TATE A	ZIP CODE	<u> </u>
Connected	Organization X Affiliated	Committee Jo	int Fundraising R	epresenta	tive Leadership PA	
esignated Agent: Identify	Organization X Affiliated by name, address (phone		int Fundraising R	epresenta	tive Leadership PA	
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Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	by name, address (phone in the control of the contr	number – optional)	STA Telephone Num	ATE A	ZIP CODE	AC S
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mainagement of Bank,	by name, address (phone in the control of the contr	number – optional)	STA Telephone Num	ATE A	ZIP CODE	AC S
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Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone in the control of the contr	number – optional)	STA Telephone Num	ATE A	ZIP CODE	AC SI

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
=	I Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spon
Colorado Bariker	S ASSOCIATION FAC		
Mailing Address	140 East 19th Ave, Suite 400		1 1 1 1 1 1 1 1 1 1
	1		
	Denver	CO	80203-1033
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee J	oint Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identii	fy by name, address (phone number - optional)		
Full Name	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or maname of Bank,	CITY A	STATE Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or maname of Bank,	CITY A	STATE Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, repository, etc.	CITY A	STATE Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A	STATE Telephone Number	

FEC Form 1S (Revised 02/2017)

	g Participant:			
1.			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
	Organization, Affiliated Committee	Joint Fundrais	ng Representative	e, or Leadership PAC Spor
Maryland Bankers	S Association PAC			
Maritimor Adalahara	186 Duke of Gloucester Street			
Mailing Address				
	Annapolis		, MD	21401-2515
Deletionship				
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Connected	d Organization X Affiliated Committee	e Joint Fui	ndraising Representa	ative Leadership PAC S
esignated Agent: Identify	by name, address (phone number -	antional)		
Full Name			1 1 1 1 1	
Full Name		- optional)		
		- optional)		
	CITY A		STATE A	ZIP CODE A
Mailing Address	CITY A			
Mailing Address TITLE OR POSITION	CITY A	Telep	STATE ▲	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	CITY A	Telep	STATE ▲	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	CITY A	Telep	STATE ▲	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	CITY A	Telep	STATE ▲	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposit boxes or material depository, etc.	CITY A	Telep	STATE ▲	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposit boxes or material depository, etc.	CITY A	Telep	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc. Mailing Address	ories: List all ban		Telephone Nun		funds, holds accounts, rents
Banks or Other Depositors afety deposit boxes or more safety deposit boxes or more safety depository, etc.	ories: List all ban				
Banks or Other Depositors afety deposit boxes or more safety deposit boxes or more safety depository, etc.	ories: List all ban				
Banks or Other Depositorsafety deposit boxes or m	ories: List all ban				
Banks or Other Deposito	ories: List all ban				
TITLE OR POSITION	▼		Telephone Nun	nber	
TITLE OR POSITION	▼				
		CITY ▲	ST	ATE 🛦	ZIP CODE ▲
Mailing Address					
Full Name					
Designated Agent: Identif	y by name, addre	ess (phone number – option	al)		
Connecte	d Organization	X Affiliated Committee	Joint Fundraising F	Representati	ive Leadership PAC Spo
Relationship:		CITY A		STATE A	ZIP CODE ▲
	Tallahassee		<u> </u>	FL	32302-1360
Mailing Address	PO Box 1360				
	PO D 4000				
Name of Any Connected Florida Bankers <i>F</i>			Fundraising Repre	sentative,	or Leadership PAC Spons
4.			FEC ID i	number	C
			FEC ID i		C
3.			FEC ID i		С
2					

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

5(g) or (h).	Joint Fundraising	y Participant:		
1.			FEC ID number	C
2.	. <u> </u>		FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
		Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	PO Box 4407		
		Topeka 	KS KS	66604-0407
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
8. Desi ç		Organization Affiliated Committee Joi by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sponsor
	Full Name			
M	Mailing Address			
•	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
L	TITLE OR POSITION	•	STATE ▲ Telephone Number	ZIP CODE ▲
 9. Bank		ies: List all banks or other depositories in whice	Telephone Number	
9. Bank safety	s or Other Depositor	ies: List all banks or other depositories in whice	Telephone Number	
9. Bank safety	ss or Other Depositor y deposit boxes or mai e of Bank,	ies: List all banks or other depositories in whice	Telephone Number	
9. Bank safety	ss or Other Depositor y deposit boxes or mai e of Bank, ository, etc.	ies: List all banks or other depositories in whice	Telephone Number	

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

h). Joint Fundraisi		FEC ID number	C
		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		TEO ID Hallison	0
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Virginia Bankers	Association Federal PAC		
1			
Mailing Address	4490 Cox Road		
	Glen Allen	, , VA	23060-3325
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Joint	Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	Affiliated Committee Joint Joint by name, address (phone number – optional)	Fundraising Represent	Leadership PAC S
esignated Agent: Identi		Fundraising Represent	Leadership PAC S
esignated Agent: Identi		Fundraising Represent	Leadership PAC S
esignated Agent: Identi		Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC S
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mainly and the second seco	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Te	STATE A	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.	fy by name, address (phone number – optional) CITY CITY Te	STATE A	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.	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

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

h). Joint Fundraisi		FEC ID number	C
1.		FEC ID number	C
2.			C
3.		FEC ID number	
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
Arizona Bankers	_	3,	-,
Mailing Address	111 West Monroe, Suite 440		
	Phoenix	AZ	85003-1711
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC S
		t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi 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 – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi 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 – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Alabama Banker	s Association, Inc. PAC		
Mailing Address	7515 Halcyon Summit Drive		
ag / taaeee	Suite 301		
	Montgomery	AL	36117-7020
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	Leadership PAC S
	fy by name, address (phone number – optional)	t Fundraising Hepresent	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Hepresent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or makes.	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi 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 – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi 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 – optional) CITY CITY Te	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc. Mailing Address	▼ pries: List all bank	CITY A cs or other depositories in w	ST Telephone Num		ZIP CODE ZIP CODE s funds, holds accounts, rent
TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition of Bank, depository, etc.	▼ pries: List all bank	CITY A	ST Telephone Num	nber	ZIP CODE A
TITLE OR POSITION anks or Other Depositor defety deposit boxes or management of Bank,	▼ pries: List all bank	CITY A	ST Telephone Num	nber	ZIP CODE A
TITLE OR POSITION	▼ pries: List all bank	CITY A	ST Telephone Num	nber	ZIP CODE A
			ST		
			ST		
				ATE A	
Mailing Address					
Mailing Address					
Mailing Address					
Full Name					
esignated Agent: Identify	y by name, addre	ss (phone number – optiona	1)		
Connected	d Organization	X Affiliated Committee	Joint Fundraising F	Representa	tive Leadership PAC Sp
Relationship:		CITY A		STATE A	ZIP CODE ▲
	Raleigh			NC	27619-9916
				<u> </u>	
Mailing Address	PO Box 19999) 			
ame of Any Connected North Carolina Ba		ffiliated Committee, Joint F	undraising Repre	sentative	, or Leadership PAC Spons
			_		
4.			FEC ID r	number	C
			_ FEC ID r	number	C
3.			_ FEC ID r	number	С
1					C

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

or(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
=	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
Okianoma Banke	ers Association Federal PAC		
Mailing Address	643 E. 41st Street		
	Oklahoma City	, , OK ,	73105-7231
Deletieneleie			
Relationship:	CITY ▲ ed Organization Affiliated Committee Join	STATE ▲ t Fundraising Representa	ZIP CODE ▲
Full Name	ify by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITIO	CITY A	STATE ▲	ZIP CODE ▲
	I	elephone Number	
Banks or Other Deposit safety deposit boxes or no Name of Bank, Depository, etc. Mailing Address	cories: List all banks or other depositories in which naintains funds.	the committee deposits	s funds, holds accounts, rents

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

Page <u>26</u> **of** <u>46</u>

h). Joint Fundraising			. ID !	
1.			ID number	
2.			ID number	C
3.		FEC	ID number	C
4		FEC	ID number	C
	Organization, Affiliated Committee, Join		Representativ	e, or Leadership PAC Spor
Indiana Bankers A	ssociation (IN BankPac - Fede	eral)		
Mailing Address	8425 Woodfield Crossing Blvd.			
	Suite 155E			
	Indianapolis		IN	46240-7321
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
		Joint Fundrai		ative Leadership PAC S
Connected	Organization Affiliated Committee by name, address (phone number – optic		sing Represent	Leadership PAC S
Connected	Organization X Affiliated Committee			Leadership PAC S
Connected esignated Agent: Identify	Organization X Affiliated Committee			ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization X Affiliated Committee			Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee by name, address (phone number – option			Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee by name, address (phone number – option of the committee) CITY A	onal)		
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee by name, address (phone number – option of the committee) CITY A	onal)	sing Represent	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Organization Affiliated Committee by name, address (phone number – option of the committee) CITY es: List all banks or other depositories in	onal) Telephone	STATE A	ZIP CODE A
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoriatety deposit boxes or mainame of Bank,	Organization Affiliated Committee by name, address (phone number – option of the committee) CITY es: List all banks or other depositories in	onal) Telephone	STATE A	ZIP CODE A
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoring the deposit boxes or main the deposit boxes or main the depository, etc.	Organization Affiliated Committee by name, address (phone number – option of the committee) CITY es: List all banks or other depositories in	onal) Telephone	STATE A	ZIP CODE A

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

or(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund ers Association PAC Federal Fund	Iraising Representative	e, or Leadership PAC Sponsor
	eis Association i Ao i ederal i dild		
Mailing Address	640 N. State Street		
	Jackson	MS	39202-3303
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization X Affiliated Committee Join	nt Fundraising Representa	ative Leadership PAC Spons
Full Name Mailing Address	ify by name, address (phone number – optional)		
	CITY A	STATE A	ZIP CODE ▲
TITLE OR POSITIO	N ▼		
	<u> </u>	Telephone Number	
Banks or Other Deposit safety deposit boxes or no Name of Bank, Depository, etc.	cories: List all banks or other depositories in which naintains funds.	the committee deposits	s funds, holds accounts, rents
			and the second of the second of the second
Mailing Address			
Mailing Address			
Mailing Address		STATE A	ZIP CODE A

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

or(h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Utah Bankers As:	sociation Action PAC		
Mailing Address	175 S. Main Street		
	Suite 1420		
	Salt Lake City	UT	84111-1904
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC Spons
Full Name	y by name, address (phone number – optional)		
	1		
TITLE OR ROOTION	_ CITY ▲	STATE A	ZIP CODE ▲
TITLE OR POSITION		lephone Number	
Banks or Other Denosite	ories: List all banks or other depositories in which	the committee deposit	s funds, holds accounts, rents
safety deposit boxes or m		ano committee doposit	o rando, nordo docodino, rome
Name of Bank, Depository, etc.			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spon
Connecticut Bani	kers Association PAC		
	<u> </u>		
	10 Waterside Drive		
Mailing Address			
	Farmington	CT	06032-3056
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi 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 – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

g) or (h). Joint Fundraisi i	ng Participant:		
., ., ., ., ., ., ., ., ., ., ., ., ., ., ., .		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
7.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Sponsor
Georgia Bankers	Political Action Committee		
	FOLINA Plana Critic 4050		
Mailing Address	50 Hurt Plaza, Suite 1050		
	Atlanta	GA L	30303-2955
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee Jo	oint Fundraising Representa	ative Leadership PAC Sponsor
Designated Agent: Identif	fy by name, address (phone number – optional)		
Mailing Address			
·			
	. CITY A	STATE A	ZIP CODE ▲
TITLE OR POSITION	. ▼	Telephone Number	
		· —	
Banks or Other Deposite safety deposit boxes or m	ories: List all banks or other depositories in which aintains funds.	ch the committee deposit	s funds, holds accounts, rents
Name of Bank, Depository, etc.			
Mailing Address			
			I , , , , I-I , , ,
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
7.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponsor
California Bankers	s Association Federal PAC		
Mailing Address	1303 J Street, Suite 600		
	Sacramento	L CA	95814-2939
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization X Affiliated Committee Joi	nt Fundraising Representa	ative Leadership PAC Sponso
Full Name			
Mailing Address			
	1		1
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
	1	Telephone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in whic aintains funds.	h the committee deposit	s funds, holds accounts, rents
Name of Bank, Depository, etc.			
Mailing Address			
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

	g Participant:			
1.		FEC I	D number	C
2		FEC I	D number	C
3.		FEC I	D number	С
4.		FEC I	D number	C
ame of Any Connected	Organization, Affiliated Committee, Jo	int Fundraising Re	presentativ	e, or Leadership PAC Spor
Minnesota Banke	rs Political Action Committee			
<u> </u>				
Mailing Address	8050 Washington Avenue South			
	Suite 200			
	Eden Prairie		MN	55344-4554
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connected	d Organization X Affiliated Committee	Joint Fundraisin	g Represent	ative Leadership PAC S
	y by name, address (phone number - op	otional)		
Full Name	by name, address (phone number — op	otional)	1 1 1	
Full Name Mailing Address	by name, address (phone number — op	otional)		
	by name, address (phone number — op	otional)		
		otional)		
	CITY A		STATE A	ZIP CODE A
Mailing Address	CITY A			
Mailing Address TITLE OR POSITION anks or Other Deposito	CITY A	Telephone N	lumber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposito offety deposit boxes or maintenance.	CITY A	Telephone N	lumber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	CITY A	Telephone N	lumber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	CITY A	Telephone N	lumber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposito aftety deposit boxes or material deposit boxes or material depository, etc.	CITY A	Telephone N	lumber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	CITY A	Telephone N	lumber	ZIP CODE A

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

TITLE OR POSITION Banks or Other Deposito safety deposit boxes or matching Address Mailing Address	ories: List all banks	CITY A	STATE A Telephone Number	zip code 🛦
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks		Telephone Number	
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks		Telephone Number	
Banks or Other Deposito safety deposit boxes or ma	ories: List all banks		Telephone Number	
Banks or Other Deposito	ories: List all banks		Telephone Number	
			Telephone Number	
TITLE OR POSITION	▼	I	1	ZIP CODE 🛦
TITLE OR POSITION	\	CITY A	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
Designated Agent: Identife	y by name, addres	es (phone number - optional)		
Connected	d Organization	Affiliated Committee Joi	nt Fundraising Representa	ative Leadership PAC Spo
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
	Cranford		NJ NJ	07016-2436
-				
Mailing Address	411 North Aven	ue East		
	=	Association Federal F	= -	
Name of Any Connected	Organization, Affi	iliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponso
4.			FEC ID number	C
1			FEC ID number	С
3.			FEC ID number	C

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

New Hampshire Bank Mailing Address Relationship: Connected Organ	anization, Affiliated Committee, Joint Fund Kers Association BankPac One Eagle Square, Suite 504 Concord CITY anization Affiliated Committee Join name, address (phone number – optional)		03301-4903 ZIP CODE A
3. 4. 4. Any Connected Organ New Hampshire Bank Mailing Address Relationship: Connected Organ Connected Organ Esignated Agent: Identify by resignated Agent: Identify by resignated Agent.	Concord CITY Affiliated Committee Join	FEC ID number	C C /e, or Leadership PAC Spon
4.	Concord CITY Affiliated Committee Join	FEC ID number	C ve, or Leadership PAC Spon 03301-4903 ZIP CODE ▲
ame of Any Connected Orga New Hampshire Bank Mailing Address Relationship: Connected Orga esignated Agent: Identify by re	Concord CITY Affiliated Committee Join	Iraising Representative	ve, or Leadership PAC Spon
New Hampshire Bank Mailing Address Mailing Address Connected Organication Ship: Connected Organication Ship: Esignated Agent: Identify by refail Name	Concord CITY Affiliated Committee Join	NH STATE	03301-4903 ZIP CODE A
New Hampshire Bank Mailing Address Mailing Address Connected Organication Ship: Connected Organication Ship: Esignated Agent: Identify by resignated Agent:	Concord CITY Affiliated Committee Join	NH STATE	03301-4903 ZIP CODE A
Relationship: Connected Organical Agent: Identify by refull Name	One Eagle Square, Suite 504 Concord CITY anization Affiliated Committee Join	NH STATE	ZIP CODE A
Relationship: Connected Organisated Agent: Identify by refull Name	Concord CITY anization Affiliated Committee Join	STATE A	ZIP CODE A
Relationship: Connected Organisated Agent: Identify by refull Name	Concord CITY anization Affiliated Committee Join	STATE A	ZIP CODE A
Relationship: Connected Organic Connected Organ	CITY A anization Affiliated Committee Join	STATE A	ZIP CODE A
Relationship: Connected Organic Connected Organ	CITY A anization Affiliated Committee Join	STATE A	ZIP CODE A
Connected Organic Connected Or	anization X Affiliated Committee Join		
esignated Agent: Identify by r		nt Fundraising Represen	tative Leadership PAC Sp
esignated Agent: Identify by r			
Mailing Address			
TITLE OR POSITION ▼	CITY ▲	STATE ▲	ZIP CODE ▲
	т	Telephone Number	
anks or Other Depositories: afety deposit boxes or maintair	List all banks or other depositories in which ns funds.	the committee depos	its funds, holds accounts, ren
ame of Bank,			
epository, etc.			
Mailing Address			

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Page $\underline{^{35}}$ of $\underline{^{46}}$

5(g) o	r(h). Joint Fundraising	Participant:	
	1.		FEC ID number
	2.		FEC ID number
	3.		FEC ID number
	4		FEC ID number
6.		Organization, Affiliated Committee, Joint Fundrais	sing Representative, or Leadership PAC Sponsor FFAIRS COMMITTEE (FEDERAL)
	Mailing Address	3897 North Front Street	
		Harrisburg	PA 17110-1535
	Relationship:	CITY ▲	STATE ▲ ZIP CODE ▲
	Connected	Organization X Affiliated Committee Joint Fi	undraising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)	
	Full Name		
	Mailing Address		
	TITLE OR POSITION '	CITY A	STATE ▲ ZIP CODE ▲
		Tele	phone Number
	safety deposit boxes or main Name of Bank,	es: List all banks or other depositories in which the	e committee deposits funds, holds accounts, rents
	Depository, etc.		
	Mailing Address		

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n). Joint Fundraising	Participant:		<u></u>
1.		FEC ID number	C
2.		FEC ID number	C
3		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected (Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spor
Oregon Bankers P	olitical Action Committee		
Mailing Address	PO Box 13249		
	Salem	OR	97309-1249
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	Leadership PAC S
	Organization Affiliated Committee Join by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC S
esignated Agent: Identify		nt Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		nt Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name			Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or main ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or main ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY ies: 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

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-					
Mailing Address					
ame of Bank, epository, etc.					
anks or Other Depositor afety deposit boxes or mai		or other depositories in v	vhich the commi	tee deposit	s funds, holds accounts, rent
			тетернопе 14	uiiiDGI [
TITLE OR POSITION	V	1	Telephone N		- -
		CITY A		STATE A	ZIP CODE ▲
			1		1 , , , , 1-1 , ,
5					
Mailing Address					
esignated Agent: Identify Full Name	by name, address	s (phone number – option	al)		
Connected	Organization X	Affiliated Committee	Joint Fundraising	Represent	ative Leadership PAC Sp
Relationship:	_	CITY A		STATE A	ZIP CODE ▲
	Lansing			MI	48933-2405
Mailing Address	507 South Grand	d Avenue			
		liated Committee, Joint · MIBANKPAC - Fe		oresentativ	e, or Leadership PAC Spon
4.				- Harribot	<u> </u>
3.) number	C
) number	C
1			_		
2.			_	number number	C

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

n). Joint Fundraising	Рагисірани:			
1.			ID number	C
2.		FEC	ID number	C
3.		FEC	ID number	C
4.		FEC	ID number	С
	Organization, Affiliated Committee, Joint	Fundraising F	Representativ	e, or Leadership PAC Spor
Louisiana Bankers	Association FEDPAC			
Mailing Address	5555 Bankers Avenue			
	Baton Rouge		LA L	70808-2608
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connected	Organization X Affiliated Committee	Joint Fundrais	sing Represent	Leadership PAC S
	Organization		Represent	Leadership PAC S
esignated Agent: Identify			ring Represent	Leadership PAC S
esignated Agent: Identify Full Name			Represent	Leadership PAC S
esignated Agent: Identify Full Name		nal)	Represent	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optio	nal)	STATE	
esignated Agent: Identify Full Name	by name, address (phone number – optio	nal)	STATE A	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or main	by name, address (phone number – optio	nal) Telephone	STATE A Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositoring deposition boxes or main arme of Bank, epository, etc.	by name, address (phone number – optio	nal) Telephone	STATE A Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or main	by name, address (phone number – optio	nal) Telephone	STATE A Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositoring deposition boxes or main arme of Bank, epository, etc.	by name, address (phone number – optio	nal) Telephone	STATE A Number	ZIP CODE A

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

1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundra Association Federal PAC	aising Representative	e, or Leadership PAC Spon
Mailing Address	P.O. Box 1122		
·			
	Jefferson City	, MO	65102-1122
Relationship:	CITY A	STATE A	ZIP CODE A
	 		
		Fundraising Representa	Leadership PAC S
	Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or malame of Bank, epository, etc	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (

Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc. Mailing Address				
Name of Bank, Depository, etc.				
Name of Bank, Depository, etc.				
safety deposit boxes or ma				
Danka au Oikan Dana i'i		er depositories in which t	ne committee deposit	s iurias, noias accounts, rents
	wiene Lint all banks as attached	or depositories is which	ho committee des	n fundo, holdo cassinte marte
		Te	lephone Number	
TITLE OR POSITION	▼ CI	ITY 🛦	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
Designated Agent: Identify	by name, address (phone	e number – optional)		
Connected	d Organization	ed Committee Joint	Fundraising Representa	tive Leadership PAC Spo
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
	Lincoln		NE I	68508-2029
Mailing / Idai eee	Suite 700			
Mailing Address	233 South 13th Street			
=	Organization, Affiliated Cos Association Feder		aising Representative	e, or Leadership PAC Sponso
4.			I-EC ID HUITIDEL	[C]
			FEC ID number	C
3.			FEC ID number	C
2.			FEC ID number	C

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

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h). Joint Fundraisi r	ig Participant:							
1.				FEC ID	number	С		_
2				FEC ID	number	C		_
3.				FEC ID	number	С		
4.				FEC ID	number	С		_
ame of Any Connected				Iraising Repre	esentativ	e, or Lead	dership PAC S	Spon
Kentucky Bankers	s Political Ac	tion Committe	ee 					
Mailing Address	600 W. Main S	Street		1 1 1 1	1 1 1			ı
3	Suite 400							
	Louisville			1	KY	402	02-2998	
Relationship:		CITY A			STATE A		ZIP CODE	A
		Affiliated Comm		nt Fundraising I	Representa	ative	Leadership PA	AC S
Connecte esignated Agent: Identif				nt Fundraising I	Representa	ative	Leadership PA	AC S
esignated Agent: Identif				nt Fundraising I	Representa	ative	Leadership PA	AC S
esignated Agent: Identif				nt Fundraising I	Representa	ative	Leadership PA	AC S
esignated Agent: Identif	y by name, addre		er – optional)		Representa		Leadership PA	
esignated Agent: Identif Full Name Mailing Address	y by name, addre	ess (phone numbe	er – optional)		Representa			
esignated Agent: Identif	y by name, addre	ess (phone numbe	er – optional)		TATE A			
Full Name Mailing Address TITLE OR POSITION	y by name, addre	ess (phone numbe	er – optional)	ST Felephone Nur	TATE Anber		ZIP CODE 4	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or market	y by name, addre	ess (phone numbe	er – optional)	ST Felephone Nur	TATE Anber		ZIP CODE 4	
Full Name Mailing Address TITLE OR POSITION	y by name, addre	ess (phone numbe	er – optional)	ST Felephone Nur	TATE Anber		ZIP CODE 4	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or management of Bank,	y by name, addre	ess (phone numbe	er – optional)	ST Felephone Nur	TATE Anber		ZIP CODE 4	
Full Name	y by name, addre	ess (phone numbe	er – optional)	ST Felephone Nur	TATE Anber		ZIP CODE 4	

FEC Form 1S (Revised 02/2017)

1.			
		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
=	d Organization, Affiliated Committee, Joint Fund Bankers Political Action Committee	raising Representative	e, or Leadership PAC Spons
Mailing Address	P.O. Box 1483		
	Columbia	SC	29202-1483
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
Connect esignated Agent: Ident		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Ident	ed Organization X Affiliated Committee Join	t Fundraising Representa	Leadership PAC Sp
Connect	ed Organization X Affiliated Committee Join	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident	ed Organization X Affiliated Committee Join	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	ed Organization X Affiliated Committee Join lify by name, address (phone number – optional)		
Connect Pesignated Agent: Ident Full Name	ed Organization X Affiliated Committee Join lify by name, address (phone number – optional)	STATE A	Leadership PAC Sp

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

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(h). Joint Fundraisi	g Participant:			
1.		FE	C ID number	С
2		FE	C ID number	С
3.			C ID number	С
4.		 , _	C ID number	C
4.				
	Organization, Affiliated Committee	_	=	
Bankers Unite in	Legislative Decisions AKA	BUILD (FKA lo	wa Banker	s Association PAC)
Mailing Address	8800 NW 62nd Ave			
	Johnston		IA	50131-2849
Relationship:	CITY A		J LJ STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee y by name, address (phone number		aising Represent	tative Leadership PAC Sp
esignated Agent: Identif	_		aising Represent	tative Leadership PAC Sp
esignated Agent: Identif	_		aising Represent	tative Leadership PAC Sp
esignated Agent: Identif	_		aising Represent	tative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number		aising Represent	
esignated Agent: Identif	y by name, address (phone number	– optional)	aising Represent	
esignated Agent: Identification Full Name Mailing Address	y by name, address (phone number	optional)		
esignated Agent: Identii Full Name Mailing Address	y by name, address (phone number	optional)	STATE A	
esignated Agent: Identification Full Name	y by name, address (phone number CITY ries: List all banks or other depositor	- optional) Telephor	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposited deposited boxes or mainly and the second seco	y by name, address (phone number CITY ries: List all banks or other depositor	- optional) Telephor	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number CITY ries: List all banks or other depositor	- optional) Telephor	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number CITY ries: List all banks or other depositor	- optional) Telephor	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, repository, etc.	y by name, address (phone number CITY ries: List all banks or other depositor	- optional) Telephor	STATE A	ZIP CODE A
esignated Agent: Identification of Early deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number CITY ries: List all banks or other depositor	- optional) Telephor	STATE A	ZIP CODE A

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

h). Joint Fundraisin	• .		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
Washington Bank	ers Association PAC		
Mailing Address	601 Union St		
Mailing Address	Suite 1720		
)	00404.4370
	Seattle	L WA	98101-1378
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected		Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee Joint by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail ame of Bank,	Affiliated Committee Joint y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee Joint y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail ame of Bank,	Affiliated Committee Joint y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or material depository, etc.	Affiliated Committee Joint y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

n). Joint Fundraising	Tartioipant.			
1.			EC ID number	C
2.		FI	EC ID number	C
3.		FI	EC ID number	C
4.		FI	EC ID number	C
	Organization, Affiliated Committee, Joi	nt Fundraisin	g Representativ	e, or Leadership PAC Spor
New Mexico Bank	ers Association PAC			
Mailing Address	316 Osuna Blvd			
	Suite 502			
	Albuquerque		NM	87107-5956
Relationship:	CITY A		STATE A	ZIP CODE ▲
	Organization	Joint Fund	raising Represent	
Connected				
Connected esignated Agent: Identify	Organization X Affiliated Committee			
Connected esignated Agent: Identify Full Name	Organization X Affiliated Committee			
Connected esignated Agent: Identify Full Name	Organization X Affiliated Committee	tional)	raising Represent	
esignated Agent: Identify Full Name Mailing Address	Organization	tional)	raising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization	tional)	raising Represent	ative Leadership PAC S
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Enks or Other Depositor of the deposit boxes or main the main arms of Bank,	Organization Affiliated Committee by name, address (phone number – option of the committee) CITY es: List all banks or other depositories	tional) Telepho	state A	Leadership PAC S ZIP CODE
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	Organization Affiliated Committee by name, address (phone number – option of the committee) CITY es: List all banks or other depositories	tional) Telepho	state A	Leadership PAC S ZIP CODE
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Enks or Other Depositor of the deposit boxes or main the main arms of Bank,	Organization Affiliated Committee by name, address (phone number – option of the committee) CITY es: List all banks or other depositories	tional) Telepho	state A	Leadership PAC S ZIP CODE
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	Organization Affiliated Committee by name, address (phone number – option of the committee) CITY es: List all banks or other depositories	tional) Telepho	state A	Leadership PAC S ZIP CODE

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8 s

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TEXAS BANKER	S ASSOCIATION-BANKERS POLIT	ICAL ACTION C	OMMITTEE
1			
Mailing Address	3321 BEE CAVES RD, SUITE 300		
	AUSTIN	, TX	78746-7066
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ed Organization X Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail to the content of the conte	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi 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 – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi 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 – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A