

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

National Pork Producers Council Pork PAC

ADDRESS (number and street)

PO Box 10383

☐ (Check if address is changed)

Des Moines

CITY ▲

IA

STATE ▲

50306

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

wietrzakp@nppc.org

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

MM / DD / YYYY
07 / 21 / 2023

3. FEC IDENTIFICATION NUMBER ►

C C00201871

4. 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 Wietrzak, Piotr, , ,

Signature of Treasurer Wietrzak, Piotr, , ,

Date

MM / DD / YYYY
08 / 15 / 2023

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

Committees Participating in Joint Fundraiser

Write or Type Committee Name

National Pork Producers Council Pork PAC**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

National Pork Producers Council

Mailing Address

PO Box 10383

Des Moines

IA

50306

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☒ Connected Organization ☐ Affiliated Organization ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Wietrzak, Piotr, , ,

Mailing Address

P.O Box 10383

Des Moines

IA

40306

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

CFO / DIR of ACCTNG

Telephone number

312

636

6444

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).Full Name
of Treasurer

Wietrzak, Piotr, , ,

Mailing Address

P.O Box 10383

Des Moines

IA

40306

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

CFO / DIR of ACCTNG

Telephone number

312

636

6444

Full Name of
Designated
Agent

Veldhuizen, Denise, , ,

Mailing Address

PO Box 10383

Des Moines

IA

50306

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Assistant Treasurer

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Wells Fargo Bank

Mailing Address

PO Box 837

Des Moines

IA

50304

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F1A
Transaction ID :

This amendment is being filed in order to officially appoint and record an assistant treasurer as well as an administrator of the Pork PAC.

Form/Schedule:
Transaction ID:

5(g) or (h). **Joint Fundraising Participant:**

1.

2.

3.

4.

FEC ID number

FEC ID number

FEC ID number

FEC ID number

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Mailing Address

-

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)Full Name Adams, Chase, , ,Mailing Address PO Box 10383

Des Moines IA 50306 -

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Administrator

Telephone Number - - 9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.Name of Bank,
Depository, etc.

Mailing Address

-

CITY ▲

STATE ▲

ZIP CODE ▲