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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. Rogers Group Inc. Political Action Committee 421 Great Circle Rd ADDRESS (number and street) (Check if address is changed) Nashville 37228 TN CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS angela.wooten@rogersgroupinc.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.rogersgroupinc.com (Check if address is changed) DATE 2017 C00277152 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. Patton, James A., , , Jr. Type or Print Name of Treasurer Patton, James A., , , Jr. [Electronically Filed] 07 2017 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

	FFC Fo	rm 1 (Revised 02/2009)	Page 2				
		OMMITTEE	raye z				
Can	didate	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. (Con information below.)	nplete the candidate				
Nam Cand	e of didate						
	didate / Affiliati	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Nam Cand	e of didate						
Par	ty Con	nmittee:	(Damas anatis				
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a				
		Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or par 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.)					
Join	t Fund	Iraising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political				
	Com	Committees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	raye 3
Rogers Group Inc. Political Action Committee	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
Rogers Group Inc.	
P. O. Box 25250 Mailing Address	
Nashville TN 37202-2520 CITY STATE ZIP	- CODE
	ship PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possess books and records.	sion of committee
Wooten, Angela, , ,	
Full Name P. O. BOX 25250	
Mailing Address	
NASHVILLE TN 37202-5250	
Title or Position CITY STATE ZIP	CODE
Risk Mgmt Supervisor Telephone number 615 780	5736
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	and address of
Full Name Patton, James A., , , Jr.	
of Treasurer	
Mailing Address 421 Great Circle Road	
Nashville TN 37228	
CITY STATE ZIP Title or Position	CODE
Treasurer Telephone number 615 780	

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Full Name of Designated Agent	Wooten, Angela, , ,							
Mailing Address	P.O. Box 25250							
	Nashville TN 37202-5250 CITY STATE ZIP	CODE						
Title or Position Risk Mgmt Supe	ervisor Telephone number 615 – 780							
safety deposit bo	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.							
	PEOPLES STATE BANK							
Mailing Address	P. O. BOX 128							
	ELLETTSVILLE IN 47429							
	CITY STATE ZIP	CODE						
Name of Bank, D	Depository, etc.							
Mailing Address								
	CITY STATE ZIP	CODE						

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

Form/Schedule: F1A Transaction ID:

Updating Assistant Treasurer, Stanley Christopher Byers and Book Keeper, Angela Wooten's title.

Form/Schedule: Transaction ID:

FEC Form 1S (Revised 02/2017)

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

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5(g) 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
6. Name of Any Connecte	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Sponsor
Mailing Address			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connec	ted Organization Affiliated Committee Join	nt Fundraising Representa	ative Leadership PAC Sponsor
8. Designated Agent: Ident Byers, Full Name	tify by name, address (phone number – optional) Stanley Christopher, , , 1819 Asheville Hwy.	it rundraising nepresente	Leadership PAC Sponsor
8. Designated Agent: Ident	tify by name, address (phone number – optional) Stanley Christopher, , ,	it rundraising nepresenta	Leadership PAC Sponsor
B. Designated Agent: Ident Byers, Full Name	tify by name, address (phone number – optional) Stanley Christopher, , , 1819 Asheville Hwy. Hendersonville	NC	28791
B. Designated Agent: Ident Byers, Full Name Mailing Address	tify by name, address (phone number – optional) Stanley Christopher, , , 1819 Asheville Hwy. Hendersonville	NC NC	28791
8. Designated Agent: Ident Byers, Full Name	tify by name, address (phone number – optional) Stanley Christopher, , , 1819 Asheville Hwy. Hendersonville CITY	NC STATE A	28791
8. Designated Agent: Ident Byers, Full Name Mailing Address TITLE OR POSITIO Assistant Treasurer	tify by name, address (phone number – optional) Stanley Christopher, , , 1819 Asheville Hwy. Hendersonville CITY tories: List all banks or other depositories in which	STATE A	28791 ZIP CODE ▲ 828 — 697 — 1007