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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Elect - The PAC of the Alabama Farmers Federation P. O. Box 11000 ADDRESS (number and street) (Check if address is changed) Montgomery 36191-ALCITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS pjohns@alfains.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 25 2020 C00094573 FEC IDENTIFICATION NUMBER > 3. 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. Pinyan, Paul, A.,, Type or Print Name of Treasurer Pinyan, Paul, A.,, [Electronically Filed] 02 25 2020 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.				
Name Cand	e of didate					
Par	ty Con	nmittee:	(D			
(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 scommittee. (i.e., nonconnected committee)	egregated 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.)				
Join	t Fund	Iraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/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.	vo or more political			
	Com	Committees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

Write or Type Committee Name Elect - The PAC of the Alabama Farmers Federation 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Alabama Farmers Federation * PO Box 11000 Mailing Address Montgomery AL 36191-0001
Elect - The PAC of the Alabama Farmers Federation 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Alabama Farmers Federation * PO Box 11000 Mailing Address
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Alabama Farmers Federation * PO Box 11000 Mailing Address
Alabama Farmers Federation * PO Box 11000 Mailing Address
PO Box 11000 Mailing Address
Mailing Address
Mailing Address
Montgomery AL 36191-0001
Montgomery AL 36191-0001
CITY STATE ZIP CODE
Relationship: x Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spon
7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commit
books and records.
Full Name
Mailing Address
Title or Position CITY STATE ZIP CODE
THE STATE OF THE S
C. Transport Link the many and address (above market a serious)) of the transport the convention of th
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 Pinyan, Paul, A., ,
of Treasurer
Mailing Address
Dadeville AL 36853-4066
CITY STATE ZIP CODE Title or Position Treasurer Tolophono number

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		<u> </u>
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	r Depositories: List all banks or other depositories in which the committee deposits funds, ho	· ·
Name of Bank, I	Farm Bureau Bank	
	Depository, etc. Farm Bureau Bank 17300 Henderson Pass#100	
Name of Bank, I	Depository, etc. Farm Bureau Bank 17300 Henderson Pass#100	2-0.00
Name of Bank, I	Parm Bureau Bank 17300 Henderson Pass#100	2-0.00 ZIP CODE
Name of Bank, I	Parm Bureau Bank 17300 Henderson Pass#100 San Antonio TX TX T8232	
Name of Bank, I	Parm Bureau Bank 17300 Henderson Pass#100 San Antonio TX TX T8232	ZIP CODE
Name of Bank, I	Parm Bureau Bank 17300 Henderson Pass#100 San Antonio CITY STATE Depository, etc.	ZIP CODE
Name of Bank, I	Parm Bureau Bank 17300 Henderson Pass#100 San Antonio CITY STATE Depository, etc.	ZIP CODE
Name of Bank, I	Parm Bureau Bank 17300 Henderson Pass#100 San Antonio CITY STATE Depository, etc.	ZIP CODE