FEC FORM 1		STATEMEI ORGANIZ	_		PAGE 1 / 4
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Fairbanks N	/lorse,	LLC Political A	ction Committee		
		1701 White Avenue			
ADDRESS (number ar	nd street)				
(Check if a is changed					
		Beloit CITY▲		WI 53 STATE ▲	2511 ZIP CODE ▲
COMMITTEE'S E-MA	IL ADDRES	SS			
(Check if a is changed		tim.oswald@fmdefens	e.com		
		Optional Second E-Mail Ad	dress efense.com		
COMMITTEE'S WEB	ddress	DRESS (URL)			
2. DATE 04	M / D 07	D / Y Y Y Y 2023			
3. FEC IDENTIFIC	ATION NU	MBER ► C C	00743435		
4. IS THIS STATEM		NEW (N) OR	× AMENDED (A)		
I certify that I have e	xamined thi	is Statement and to the best	of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name of	of Treasurer	Barefield, Jared, , ,			
Signature of Treasure	r <i>Barefie</i>	eld, Jared, , ,	[Electronically Filed]	Date 04	/ D D / Y Y Y Y 18 2023
NOTE: Submission of f	alse, errone		may subject the person signing t TION SHOULD BE REPORTED		e penalties of 52 U.S.C. §30109
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

Image# 202304189581035682

04/18/2023 12 : 12

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate 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. (Complein information below.)	ete the candidate
Name of Candidate	
Candidate Office Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee: (National, State (Demo (d) This committee is a or subordinate) committee of the Repub	ocratic, lican, etc.) Party
Political Action Committee (PAC):	
(e) x This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:
Corporation X Corporation w/o Capital Stock	bor Organization
	operative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated 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 (Hybr	rid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	

- This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

(i)

1.	L														С				
2.	L														С				

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Fairbanks Morse, LLC Political Action Committee

6.	Name of Any Connected Or Fairbanks Morse, LLC	-	Comm	nittee	, Joi	nt F	und	lraisi	ing l	Rep	rese	entat	ive,	or	Lea	dersh	ıip	PAC	Sp	ons	or	
	Mailing Address	701 White Avenue												1								
							I			1												
		Beloit									l	WI			535	511 						
			CITY	∕▲							S	TATE				2	ZIP	COI	JE .			
	Relationship: X Connected	Organization Affiliat	ted Org	ganiza	ition		Jo	int F	undr	aisin	ıg R	epres	senta	ative	Ð	L	ead	ershi	p PA	AC S	Spor	ISOI

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Barefield, C	lared, , ,
Full Name	
Mailing Address	701 White Avenue
	Beloit WI53511
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
	Telephone number 608 - 364 - 8086

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	Barefield, Jared, , ,
of Treasurer	
Mailing Address	701 White Avenue
	Beloit WI53511
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
CAO	Image: Telephone number 608 - 364 - 8086

FEC Form 1 (Revised 02	2/2	200	9)																			Pag	e 4	<u>۱</u>		
Full Name of Designated Agent																						1			1	
Mailing Address	L																									
	L																									
	L																									
						Cľ	TΥ							:	ST/	ΛTE				ZI	ΡC		Œ			
Title or Position ▼																										
										Tel	əph	one	e ni	umł	ber				- [

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.

	First National Bank and Trust		
Mailing Address	345 E Grand Avenue		
	Beloit	WI 5351	1
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, I	Depository, etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE