PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) CORN REFINERS ASSOCIATION PAC 1701 PENNSYLVANIA AVENUE NW ADDRESS (number and street) SUITE 400 (Check if address is changed) WASHINGTON DC 20006 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS rbowen@corn.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 26 2022 C00554071 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. Bode, John, W.,, Type or Print Name of Treasurer Bode, John, W.,, [Electronically Filed] 04 2023 Signature of Treasurer Date 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. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530
•,			Local 202-694-1100

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. TYPE OF COMMIT	TEE:				
Candidate Comm	nittee:				
(a) This comm	ittee is a principal campaign committee. (Complete the candidate information below.)				
	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name of Candidate					
Candidate Party Affiliation	Office Sought: House Senate President	State District			
(c) This comm	nittee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Committee:					
(d) This comm	ittee is a (National, State (Democratic and State) or subordinate) committee of the Republic	ratic, can, etc.) Party			
Political Action C	Committee (PAC):				
(e) X This comm	ittee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a			
Corpo	oration Corporation w/o Capital Stock Labo	or Organization			
Memb	pership Organization	perative			
x In	n addition, this committee is a Lobbyist/Registrant PAC.				
	ittee supports/opposes more than one Federal candidate, and is NOT a separate segreg (i.e., nonconnected committee)	jated fund or party			
lr	n addition, this committee is a Lobbyist/Registrant PAC.				
lr	n addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
(g) This comm	uittee is an independent expenditure-only political committee (Super PAC).				
lr	n addition, this committee is a Lobbyist/Registrant PAC.				
(h) This comm	ittee is a political committee with both contribution and non-contribution accounts (Hybric	J PAC).			
lr	n addition, this committee is a Lobbyist/Registrant PAC.				
Joint Fundraising	Representative:				
(1)	littee collects contributions, pays fundraising expenses and disburses net proceeds for two solutions, at least one of which is an authorized committee of a federal candidate.	o or more political			
(1)	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 Parti	icipating in Joint Fundraiser				
1.	C				
ı	C				

Title or Position ▼

Treasurer

Γ	_			_		
•	FEC Form 1 (Revised 0	02/2009)		Page 3		
٧	Vrite or Type Committee Name					
	CORN REFINE	ERS ASSOCIATION F	'AC			
6.	=	Organization, Affiliated Committee, Joint	Fundraising Representative, o	r Leadership PAC Sponsor		
	Corn Refiners Assoc	;;ation 				
	Mailing Address	1701 Pennsylvania Ave NW				
		Suite 400				
		Washington	DC	20006		
		CITY ▲	STATE ▲	ZIP CODE ▲		
	Relationship: X Connected	Organization Affiliated Organization	Joint Fundraising Representative	ve Leadership PAC Sponso		
	_		_	_		
7.	books and records. Bowen, Ro	tify by name, address (phone number opt	ional, and position of the person in	r possocioni ei comminace		
	Full Name					
	Mailing Address	1701 Pennsylvania Ave NW				
		Suite 400				
		Washington	DC	20006		
		CITY ▲	STATE ▲	ZIP CODE ▲		
	Title or Position ▼	OII	OIAIL =	211 0002 =		
	Assistant Treasurer		Telephone number			
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 Bode, John	n, W., ,				
	of Treasurer					
	Mailing Address	1701 Pennsylvania Ave NW				
		Suite 400				
		Washington	DC L	20006		
		CITY ▲	STATE ▲	ZIP CODE ▲		

1634

202

Telephone number

331

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Full Name of Designated Agent	Bowen, Robin, , ,				
Mailing Address	1701 Pennsylvania Ave NW				
	Suite 400				
	Washington	OC 20006			
		ATE ▲ ZIP CODE ▲			
Title or Position					
Assistant Treasu	Telephone number				
	Depositories: List all banks or other depositories in which the committee depositories or maintains funds.	eposits funds, holds accounts, rents			
Name of Bank, [Name of Bank, Depository, etc.				
	Eagle Bank				
Mailing Address	7830 Old Georgetown Rd.				
	Bethesda	MD 20814			
	CITY ▲ STA	TE ▲ ZIP CODE ▲			
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲ STA	TE ▲ ZIP CODE ▲			