Only

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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) over the lines. is changed) Southern Nuclear Operating Company, Inc. PAC 3535 Colonnade Parkway ADDRESS (number and street) (Check if address is changed) Birmingham 35243 ALCITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kaduncan@comerica.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 07 2020 C00250407 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. Sitzler, Eric, , , Type or Print Name of Treasurer Sitzler, Eric,,, [Electronically Filed] 03 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

Local 202-694-1100

	FFC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>				
		OMMITTEE	raye <b>z</b>				
Can	ndidate	lidate 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. (Complete the candidate information below.)					
Nam Cand	e of didate						
	didate / Affiliati	Office Sought: House Senate President	State				
(c)  Name of Candidate		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Par	ty Con	Committee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
		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 party 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	mittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

FEC Form 1 (Revis	ed 02/2009)		Page <b>3</b>
Write or Type Committee N	ame		
Southern Nuc	clear Operating Compa	ny, Inc. PAC	
	ed Organization, Affiliated Committee, Join		r Leadership PAC Sponsor
Southern Nuclear O	perating Company		
Mailing Address	3535 Colonnade Parkway		
	Birmingham	AL	35243
	CITY	STATE	ZIP CODE
Relationship: x Conne	ected Organization Affiliated Committee	Joint Fundraising Representation	Leadership PAC Sponsor
<ol> <li>Custodian of Records: books and records.</li> </ol>	Identify by name, address (phone number	optional) and position of the per	son in possession of committee
Full Name			
Mailing Address			
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	
8. <b>Treasurer:</b> List the name any designated agent (e.	and address (phone number optional) of g., assistant treasurer).	the treasurer of the committee; a	nd the name and address of
Full Name Sitzler, of Treasurer	Eric, , ,		
Mailing Address	3535 Colonnade Parkway		
	Bin N 623 EC		
	Birmingham	AL	35243
<del>-</del>	CITY	STATE	ZIP CODE
Title or Position PAC Treasurer		Telephone number	5 992 5539

1 2 7 011	<b>n 1</b> (Revised 02/2009)	Page <b>4</b>		
	II 1 (NOVISCU 02/2000)	i aye <del>1</del>		
Full Name of Designated Agent				
Mailing Address				
Title or Position	CITY STATE	ZIP CODE		
lue of 1 osition	Telephone number			
9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Comerica Bank  PO Box 75000  Mailing Address				
Mailing Address	,PO Box 75000			
Mailing Address	,PO Box 75000			
Mailing Address	,PO Box 75000			
Mailing Address	PO Box 75000	ZIP CODE		
Mailing Address  Name of Bank,	PO Box 75000  Detroit  MI 48275  CITY STATE			
	PO Box 75000  Detroit  MI 48275  CITY STATE	ZIP CODE		
	PO Box 75000  Detroit  CITY  STATE  Depository, etc.	ZIP CODE		
Name of Bank,	PO Box 75000  Detroit  CITY  STATE  Depository, etc.	ZIP CODE		
Name of Bank, I	PO Box 75000  Detroit  CITY  STATE  Depository, etc.	ZIP CODE		

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

Update PAC Treasurer

Form/Schedule: Transaction ID:

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

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5(g) c	or(h). <b>Joint Fundraisin</b> ç	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundral y Employees PAC	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	241 Ralph McGill Boulevard, NE		
		Bin 10115		
		Atlanta	GA GA	30308
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization X Affiliated Committee Joint F	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or main	ies: List all banks or other depositories in which the intains funds.	ne committee deposit	s funds, holds accounts, rents
	Depository, etc.			
	Dopository, etc.			
	Mailing Address			