FEC FORM 1	STATEMEN ORGANIZ		Off	PAGE 1 / 4 ——
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	PO BOX 361785			
(Check if address is changed)				
	BIRMINGHAM		AL 3523	36
	CITY A		STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)		L.COM		
<i>c</i> ,	Optional Second E-Mail Add	dress		
(Check if address is changed)	www.arnoldforAlabama.com			
	12 / Y Y Y Y 2019			
3. FEC IDENTIFICATION N		00705269		
4. 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.
Type or Print Name of Treasur	er RALLS, STEVE, , ,			
Signature of Treasurer	LLS, STEVE, , ,	[Electronically Filed]	Date 10	D D / Y Y Y Y 12 2019
NOTE: Submission of false, error	neous, or incomplete information ANY CHANGE IN INFORMATION	may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

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FEC F	Drm 1 (Revised 02/2009)         Page 2
	COMMITTEE
	e 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.)
Name of Candidate	
Candidate Party Affilia	tion REP Office State AL State
,	District 00
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	
(d)	This committee is a       (National, State or subordinate) committee of the       (Democratic, Republican, etc.) Party.
Political /	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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.)
Joint Fun	draising Representative:
(g)	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.
(h)	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.
Con	nmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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Write or Type Committee Name

## ARNOLD FOR ALABAMA

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address										
	CITY	STATE	ZIP CODE							
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor										

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

RALLS, S	TEVE, , ,
Full Name	
Mailing Address	332 W LEE HWY
	#303
	WARRENTON     VA     20186
Title or Position	CITY STATE ZIP CODE
	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 of Treasurer	RALLS, STEVE, , ,		
Mailing Address	332 W LEE HWY		
	#303		
	WARRENTON         VA         20186         –         / <th <="" th=""> <th <="" th=""> <!--</td--></th></th>	<th <="" th=""> <!--</td--></th>	</td
	CITY STATE ZIP CODE		
Title or Position	Telephone number		

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																			1									
Mailing Address		L																										
		L																										
							CI				 									L		71		_ 				
Title or Position							CI	ΙΥ									517					ZI	P	JUL	)E			
												Tele	eph	ione	e n	umt	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 o	f Bank,	Depository,	etc.
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REGIC			
Mailing Address	1900 5TH AVE N		
	BIRMINGHAM		03
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE