Image# 202006199240013852				00/19/2020 13.04
FEC FORM 1	STATEMEI ORGANIZ	-		PAGE 1 / 4 —
			Of	fice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
6th Generation P				
	PO Box 7013			
ADDRESS (number and street)				
(Check if address is changed)				
	Missoula └── └── └── └── └── └── └── └── └── └──		MT 598 STATE ▲	07
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address is changed)	whitney@williamswork	s.com		
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 06 / 1	9 / Y Y Y Y 2020			
3. FEC IDENTIFICATION N	UMBER ► C c	00727313		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief	t is true, correct and	complete.
Type or Print Name of Treasure	Williams, Whitney, , ,			
Signature of Treasurer	ams, Whitney, , ,	[Electronically Filed]	Date 06	19 / Y Y Y Y 2020
NOTE: Submission of false, erron		may subject the person signing ON SHOULD BE REPORTED		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

06/19/2020 13 : 04

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FEC F	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	
Candidat	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	<i>l</i> .)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Co information below.)	mplete the candidate
Name of Candidate		
Candidate Party Affilia	ion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	nmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Part
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or part
	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 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Cor	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

6th Generation PAC

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

N																																		
L																																		
	Mailing Address																																	
																									L						-L			
									CI	TΥ											SI	TAT	E					Z	ΊP	СО	DE			
	Relationship:	Connected	l Org	aniza	ation		Aff	iliat	ed	Cor	mm	itte	е		Joi	int F	un	dra	isin	g F	Rep	res	en	tati	ve	0	L	eac	lers	ship	PA	IC S	броі	nsor
7.	Custodian of Rec books and records		itify b	oy na	me,	add	res	s (p	ohoi	ne	nur	nbe	er	- 0	otio	nal)) ar	nd j	pos	itio	n c	of th	ne	per	sor	n ir	n po	oss	ess	ion	of	cor	nmi	ttee
	Full Name	Williams, V	Vhitn	ey, ,	,																													
			PO	Box	701	3																												

Mailing Address			
5			
	Missoula	MT	59807
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	06 546 5742

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	Williams, Whitney, , ,			
Mailing Address	PO Box 7013			
	Missoula		MT	59807
		CITY	STATE	ZIP CODE
Title or Position Treasurer			Telephone number	406 546 5742

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Full Name of Designated Agent																	1			1			I		1			_
Mailing Address																												
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Title or Position																												
													Tele	eph	ione	e ni	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 of Bank, Depository, etc.

	First Interstate Bank		
Mailing Address	101 E. Front Street		
	Missoula	MT 59806	
	CITY	STATE	ZIP CODE
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE