Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Rural GroundGame 3X 676 Melrose Rd ADDRESS (number and street) (Check if address is changed) Rockingham 49221 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS ian@ruralgroundgame.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.ruralgroundgame.org/ (Check if address is changed) DATE 2022 C00758003 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. McNally, Ian, , , Type or Print Name of Treasurer McNally, Ian, , , [Electronically Filed] 08 2022 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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Т	YPE O	F COMMITTEE:				
C	andid	andidate Committee:				
(a	a)	This committee is a principal campaign committee. (Complete the candidate information below.)				
(k	o)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate			
	Name Candid					
	Candid Party A	date Office House Senate President	State District			
(0	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name Cand					
P	arty C	Committee:				
	a)	This committee is a (National, State (Democrat	ic, n, etc.) Party			
P	olitica	Il Action Committee (PAC):				
(6	e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a			
		Corporation Corporation w/o Capital Stock Labor	Organization			
		Membership Organization Trade Association Cooper	rative			
		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.)				
(g) This committee is an independent expenditure-only political committee (Super PAC).						
		In addition, this committee is a Lobbyist/Registrant PAC.				
(h	n) x	This committee is a political committee with both contribution and non-contribution accounts (Hybrid F	PAC).			
		In addition, this committee is a Lobbyist/Registrant PAC.				
J	oint F	undraising Representative:				
(i)	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.				
	Comr	mittees Participating in Joint Fundraiser				
	1.	C				
	1					

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٧	Vrite or Type Comm	mittee Name						
	Rural Gr	roundGame 3X						
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE							
	Mailing Address							
			[_]					
			710 0005 4					
		CITY ▲ STATE ▲	ZIP CODE ▲					
	Relationship:	Connected Organization	Leadership PAC Sponso					
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.							
		McNally, Ian, Edward, ,						
	Full Name							
	Mailing Address	1320 W Westwood Dr						
		Adrian I MI 1 49	9221					
		CITY ▲ STATE ▲	ZIP CODE ▲					
	Title or Position •							
	Executive Directo	or Telephone number 517	_ 902 _ 2546					
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							
	Mailing Address	1320 W Westwood Dr						
		Adrian MI 49	9221					
		CITY ▲ STATE ▲	ZIP CODE ▲					
	Title or Position ▼	▼						
	Executive Directo	or Telephone number	_ 902 2546					

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Full Name of Designated Agent	McNally, lan, , ,						
Mailing Address	1320 W Westwood Dr						
	Adrian	MI 49	9221				
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲				
Executive Director		Telephone number 517	- 902 - 2546				
	epositories: List all banks or other depositories in which sor maintains funds.	ch the committee deposits funds,	holds accounts, rents				
Name of Bank, De	pository, etc.						
DuPont Community Credit Union							
Mailing Address	1820 S High St						
	Harrisonburg	VA22	801				
	CITY ▲	STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.							
L							
Mailing Address							
	CITY ▲	STATE ▲	ZIP CODE ▲				

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DCF H Z G7 < 98 I @ 'CF' + H9 A = N5 H = CB

Form/Schedule: F1A Transaction ID:

This is in accordance with our earlier request to designate this committee as a Carey committee, and this is the reason for this report (in addition to an address change).

Form/Schedule: Transaction ID: