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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. FIGHTING FOR ALABAMA FUND, INC 831 LINWOOD CT ADDRESS (number and street) (Check if address is changed) BIRMINGHAM 35222 ALCITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS COMPLIANCE@FIGHTINGFORALABAMAFUND.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00708842 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. REISNER, MICHELE, , , Type or Print Name of Treasurer REISNER, MICHELE, , , [Electronically Filed] 06 2019 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 Only Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected 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.	
(5)			areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Na		, ago o
FIGHTING FO	OR ALABAMA FUND, INC	
	d Organization, Affiliated Committee, Joint Fundraising Representation	ative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STA	TE ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
Custodian of Records: lo books and records.	Identify by name, address (phone number optional) and position of t	the person in possession of committee
	ER, MICHELE, , ,	ı
Full Name	831 LINWOOD CT	
Mailing Address		
	BIRMINGHAM	35222
Title or Position	CITY STATE	E ZIP CODE
TREASURER	Telephone number	
3. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the commg., assistant treasurer).	nittee; and the name and address of
Full Name REISNE	ER, MICHELE, , ,	
of Treasurer	JOSE LINIMOOD CT	
Mailing Address	831 LINWOOD CT	
	BIRMINGHAM	
Title or Position TREASURER	CITY STATE Telephone number	ZIP CODE
	·	

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Full Name of Designated Agent	[1 1 1 1 1 1 1
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1.1
	Telephone number	
Banks or Other safety deposit bo Name of Bank, I	Depositories: List all banks or other depositories in which the committee deposits funds, hole oxes or maintains funds. Depository, etc. CHAIN BRIDGE BANK	ds accounts, rents
safety deposit bo	Depository, etc. CHAIN BRIDGE BANK 1445-A LAUGHLIN AVE	ds accounts, rents
safety deposit bo Name of Bank, I	Depository, etc. CHAIN BRIDGE BANK	ds accounts, rents
safety deposit bo Name of Bank, I	Depository, etc. CHAIN BRIDGE BANK 1445-A LAUGHLIN AVE	ds accounts, rents
safety deposit bo Name of Bank, I	CHAIN BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	CHAIN BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE	ZIP CODE
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. CHAIN BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, I Mailing Address	Depository, etc. CHAIN BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, I Mailing Address	Depository, etc. CHAIN BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE Depository, etc.	ZIP CODE

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: