Only

PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. ERNON PARKER FOR CONGRESS 2470 DANIELLS BRIDGE ROAD ADDRESS (number and street) STE. 121 (Check if address is changed) **ATHENS** 30606 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PAUL@PDSCOMPLIANCE.COM (Check if address is changed) Optional Second E-Mail Address MGOODE@PDSCOMPLIANCE.COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2013 C00541508 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. PAUL KILGORE Type or Print Name of Treasurer PAUL KILGORE [Electronically Filed] 09 20 2013 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

FE	EC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	
Cand	lidate	e Committee:	
(a)	\times	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. (Con information below.)	nplete the candidate
Name Candid		VERNON PARKER	
Candic Party /		on REP Office Sought: X House Senate President	State AZ District 09
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politi	cal A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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 s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	Oom		
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	1		

FEC Form 1 (Revise	d 02/2009)	Page 3
Write or Type Committee Na		. 290 0
	RKER FOR CONGRESS	
	d Organization, Affiliated Committee, Joint Fundraising Representative	ve, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	eted Organization Affiliated Committee Joint Fundraising Represe	ntative Leadership PAC Sponsor
 Custodian of Records: lo books and records. 	dentify by name, address (phone number optional) and position of the	e person in possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
8. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee, assistant treasurer).	ee; and the name and address of
	ILGORE	
of Treasurer	2470 DANIELLS BRIDGE RD STE 121	
Mailing Address		
	ATHENS	30606
	CITY STATE	ZIP CODE
Title or Position TREASURER	Telephone number	706 - 534 - 7780

	ed 02/2009)	
Full Name of Designated Agent PATRICK	(MOONEY	
Mailing Address	2470 DANIELLS BRIDGE RD	
	STE. 121	
	ATHENS	30606
	CITY STATI	E ZIP CODE
Title or Position ASSISTANT TREASURER		703 - 304 - 2469
safety deposit boxes or ma	intains funds.	
Name of Bank, Depository,	etc.	
Name of Bank, Depository,	etc.	
Name of Bank, Depository,	etc.	
Name of Bank, Depository,	etc.	
Name of Bank, Depository,	etc.	V 25322
Name of Bank, Depository,	etc. ED BANK 500 VIRGINIA ST.	
Name of Bank, Depository,	ED BANK 500 VIRGINIA ST. CHARLESTON W CITY STAT	
Name of Bank, Depository, UNITE Mailing Address	ED BANK 500 VIRGINIA ST. CHARLESTON W CITY STAT	
Name of Bank, Depository, Mailing Address Name of Bank, Depository,	ED BANK 500 VIRGINIA ST. CHARLESTON W CITY STAT	
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