(Revised 06/2012)

FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. WELLS PAC 824 S Milledge Ave Ste 101 ADDRESS (number and street) (Check if address is changed) Athens 30605 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS wellspac@pdscompliance.com (Check if address X is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00500793 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. KILGORE, PAUL, , , Type or Print Name of Treasurer KILGORE, PAUL, , , [Electronically Filed] 12 2018 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

Toll Free 800-424-9530

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	rty Con	nmittee:	
(d)		(National, State	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 conr	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.	
(f)			gradated fund or party
(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 tw 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 Nam	е	
WELLS PAC		
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
REP JAMES AUSTIN	SCOTT	
Mailing Address	621 MCCLENDON STREET	
Walling Address	ASHBURN GA 31714 CITY STATE	ZIP CODE
Relationship: Connecte	ad Organization Affiliated Committee Joint Fundraising Representative	adership PAC Sponsor
Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person in pos	ssession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nar assistant treasurer).	me and address of
Full Name KILGORE of Treasurer	;, PAUL, , ,	
Mailing Address	824 S Milledge Ave Ste 101	
	Athens GA 30605 CITY STATE	ZIP CODE
Title or Position Treasurer		534 - 7780

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Full Name of Designated		
Agent	1	
Mailing Address		
	CITY STATE Z	ZIP CODE
Title or Position		1 1
	Telephone number	
Name of Bank,		
Name of Bank,	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA GA 30302	ZIP CODE
Name of Bank,	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA GA 30302 CITY STATE 2	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA GA 30302 CITY STATE 2	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA GA 30302 CITY STATE 2	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA GA 30302 CITY STATE 2	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA GA 30302 CITY STATE 2	ZIP CODE

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
AUSTIN SCOTT	VICTORY FUND		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name _ _ _ Mailing Address	CITY A		ZIP CODE A
Full Name _ _ Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
Full Name _ _ Mailing Address TITLE OR POSITION	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank,	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	STATE Telephone Number ch the committee deposit	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank,	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	STATE Telephone Number ch the committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	STATE Telephone Number ch the committee deposit	s funds, holds accounts, rents