FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		instructions)		Office use only
NAME OF COMMITTEE (in	full) (Check if is change		ying, type 12Fi	E4M5
FREEDOM SE	CURITY PROSPERITY PA	C (FSP PAC)		
ADDRESS (number and	PO BOX 6512	20	 	
_				
X (Check if addr is changed)	washingto	N 	pc	20035
		CITY▲	STATE	E▲ ZIP CODE ▲
COMMITTEE'S E-MA	IL ADDRESS			1
payneasiney				
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
COMMITTEE'S FAX N 2028576395	NUMBER			
2. DATE 0.4		Y		
3. FEC IDENTIFICA	ATION NUMBER	C C00425447		
4. IS THIS STATEM	MENT X NEW (N)	OR AME	NDED (A)	
I certify that I have exam	ined this Statement and to the best	of my knowledge and belief it is	true, correct and comple	ete
Type or Print Name of	Treasurer Craig En	gle		
Signature of Treasurer	. Electronically Filed by Cr	aig Engle	Date	04 / 26 / Y Y Y Y Y
NOTE: Submission of fa	lse, erroneous, or incomplete inforr	nation may subject the person s	-	•
Office Use Only		Federal El Toll Free 8	er information contact: ection Commission 800-424-9530	FEC FORM 1 (Revised 02/2003)

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5.	TYPE OF COMMITTEE (Check One)					
	(a) 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. (Complete the	ne candidate				
	information below.)					
	Name of Candidate					
	Candidate Office Party Affiliation Sought: House Senate President	State District				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
	(d) This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.				
	(e) This committee is a separate segregated fund					
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee.	d fund or party				
6.	Name of Any Connected Organization or Affiliated Committee					
ı	None	.				
<u> </u>						
	Mailing Address					
	CITY▲ STATE ▲	ZIP CODE A				
CHY STATE ZIE						
	Relationship					
Type of Connected Organization:						
	Corporation Corporation w/o Capital Stock Labor Organi	zation				
	Membership Organization Trade Association Cooperative					

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Write or Type	Committee Name							
FREED	OM SECURITY PRO	SPERITY PAC (FSP PAC)						
	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.							
Full Name	Craig Engle Full Name							
Mailing Ad	ldress	1050 Connecticut Avenue						
	_	Washington		DC _	20035			
Title or Po	sition V	CITY A	s	TATE	ZIP CODE	A		
	Treasurer		Telephone numbe	202	. – 775 . – – _	5791		
of Treasur Mailing Ad		le 1050 Connecticut Av	enue					
		Washington		DC _	20035			
Title or Po	sition 🔻	CITY A	S	TATE▲	ZIP CODE	Ε Δ		
	Treasurer		Telephone numbe	202		5791		
Full Name Designate Agent		yne						
Mailing Ad	ldress	1050 Connecticut Avenue, NW						
	_	Washington		DC	20036 _			
Title or Po	sition \	CITY A	S	TATE A	ZIP CODE	A		
	Assistant Tre	asurer	Telephone numbe	202	715	8425		

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts safety deposit boxes or maintains funds. Name of Bank, Depository, etc.			
	Mailing Address	Wachovia 1100 Connecticut Avenue, NW		
		Washington DC 200	136 _ [_ , _ , _	
		CITY △ STATE △ ZIF	P CODE 🛆	