Image# 201601239004570199				01/23/2010 21 . 33
FEC FORM 1	STATEMEI ORGANIZ		o	PAGE 1 / 4
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
	is changed)	over the lines.		
1				
ADDRESS (number and street)	PO BOX 12243			
(Check if address				
is changed)	JACKSON		MS392	236
			STATE ▲	
COMMITTEE'S E-MAIL ADDR				
(Check if address	so@gobergroup.com			
is changed)				
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE AI	DDRESS (URL)			
	08 <sup>7</sup> 2016			
3. FEC IDENTIFICATION N	NUMBER ► C c	00517433		
4. 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 i	it is true, correct and	d complete.
Type or Print Name of Treasur	rer Luke McAlpin			
Signature of Treasurer	e McAlpin	[Electronically Filed]	Date 01	23 / Y Y Y Y 2016
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED \		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYPE OF	COMMITTEE
Candidat	e Committee:
(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 candidate information below.)
Name of Candidate	
Candidate Party Affilia	tion Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	mmittee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Part
Political /	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	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 segregated fund or part 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.)
Joint Fun	draising Representative:
(g)	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.
(h)	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.
Cor	nmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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Write or Type Committee Name

## FREEDOM PIONEERS ACTION NETWORK

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N				
	Mailing Address			
		CITY	STATE	ZIP CODE
	Relationship: Connecte	d Organization Affiliated Committee	Joint Fundraising Representative	eadership PAC Sponsor
7.	books and records.	ntify by name, address (phone number op	tional) and position of the person in p	ossession of committee
	Shannon Full Name	D'Leary		
	Mailing Address	PO Box 341016		
			TX 78734	
	Title or Position	CITY	STATE	ZIP CODE
	Custodian of Records		Telephone number	
8.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	e treasurer of the committee; and the r	name and address of
	Full Name Luke McAl	pin		
	Mailing Address	1225 Countrywood Cove		
		Tupelo	MS 38801 STATE	
I	Title or Position Treasurer		Telephone number	

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Full Name of	Shannan O	"																										
Designated Agent	Shannon O		1	I	1		I	I	1	1	I	1	I	I	I	I	1	I	1	I	1	I	1	1		I		. 1
Agent																					_		_					
Mailing Address		PO Box 341016	Í																									
		Austin														L	X			7	873	34 			-[			
					CIT	Y										STA	ΤE						ZIF	, C	ODE	Ξ		
Title or Position	urer						1																					
											Tele	eph	one	e ni	ımt	ber						L			– L			

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Wells F	-argo		
Mailing Address	420 Montgomery Street		
	San Francisco	CA 94104 –	
	CITY	STATE ZIP CODE	
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE ZIP CODE	