FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
SECRETARY OF THE SENATE
15 JAN 30 PM 3:12
Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

KIRK FOR SENATE

ADDRESS (number and street) PO BOX 2594

☒ ◀ (Check if address is changed)

CHICAGO — CITY ▲
IL — STATE ▲
60690 - ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ ◀ (Check if address is changed) PAUL@PDSCOMPLIANCE.COM

Optional Second E-Mail Address
MGOODE@PDSCOMPLIANCE.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ ◀ (Check if address is changed) WWW.KIRKFORSENATE.COM

2. DATE MM 07 / DD 20 / YYYY 2009

3. FEC IDENTIFICATION NUMBER ▶ C C00350785

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 it is true, correct and complete.

Type or Print Name of Treasurer Paul Kilgore, Assistant Treasurer

Signature of Treasurer

Date MM 01 / DD 28 / YYYY 2015

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.

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For further information contact:
Federal Election Commission
Toll Free 800-424-9530

5. TYPE OF COMMITTEE

Candidate Committee:

(a) [X] 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: MARK STEPHEN KIRK

Candidate Party Affiliation: REP

Office Sought: [ ] House [X] Senate [ ] President

State: IL

District: 00

(c) [ ] This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate:

Party Committee:

(d) [ ] This committee is a [ ] (National, State or subordinate) committee of the [ ] (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

(e) [ ] This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party 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 Fundraising 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.

Committees Participating in Joint Fundraiser

1. FEC ID number C
2. FEC ID number C
3. FEC ID number C
4. FEC ID number C

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Write or Type Committee Name

KIRK FOR SENATE

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

KIRK VICTORY COMMITTEE

Mailing Address 2470 DANIELLS BRIDGE RD STE 121

ATHENS (CITY) GA (STATE) 30606 - (ZIP CODE)

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☒ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name PAUL KILGORE

Mailing Address 2470 DANIELLS BRIDGE RD STE 121

ATHENS (CITY) GA (STATE) 30606 - (ZIP CODE)

Title or Position CUSTODIAN OF RECORDS

Telephone number 706 - 534 - 7780

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer FRANK CONSIDINE

Mailing Address 140 THORNTREE LN

WINNETKA (CITY) IL (STATE) 60093 - (ZIP CODE)

Title or Position TREASURER

Telephone number 847 - 446 - 2406

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Full Name of Designated Agent: PAUL KILGORE

Mailing Address: 2470 DANIELLS BRIDGE RD STE 121

CITY: ATHENS STATE: GA ZIP CODE: 30606 -

Title or Position: ASSISTANT TREASURER

Telephone number: 706 - 534 - 7780

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.: NORTH SHORE COMMUNITY BANK

Mailing Address: 1145 WILMETTE AVE

CITY: WILMETTE STATE: IL ZIP CODE: 60091 -

Name of Bank, Depository, etc.: SUNTRUST BANK

Mailing Address: PO BOX 4418

CITY: ATLANTA STATE: GA ZIP CODE: 30302 -

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JULIE ADAMS
SECRETARY

DANA K. MACCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232

WASHINGTON, DC 20510-7116

PHONE(202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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