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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. American Values PAC PO Box 26141 ADDRESS (number and street) (Check if address is changed) Alexandria 22313 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS .chris@electioncfo.com (Check if address is changed) Optional Second E-Mail Address brenda@electioncfo.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.americanvaluespac.org/ (Check if address is changed) DATE 05 2018 C00623371 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. Marston, Chris, , , Type or Print Name of Treasurer Marston, Chris,,, [Electronically Filed] 09 05 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 (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FI	FC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	1 4go 2
Cano	didate	Committee:	
(a)	Ш	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. (Cominformation below.)	plete the candidate
Name Candi			
Candid Party	date Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	y Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	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)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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 Na		3
American Val	ues PAC	
	d Organization, Affiliated Committee, Joint Fundraising Representative	ve, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Represer	ntative Leadership PAC Sponso
Custodian of Records: books and records.	dentify by name, address (phone number optional) and position of the	person in possession of committee
	s, Brenda, , ,	
Full Name Mailing Address	PO Box 26141	
Mailing Address		
	Alexandria	22313
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	
3. Treasurer: List the name any designated agent (e.c	and address (phone number optional) of the treasurer of the committee., assistant treasurer).	ee; and the name and address of
	n, Chris, , ,	
of Treasurer	PO Box 26141	
Mailing Address		
	Alexandria	22313
Title or Position Treasurer	CITY STATE	ZIP CODE
<u> </u>	Telephone number	

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit boxes	epositories: List all banks or other depositories in which the committee deposits funds, hole s or maintains funds.	ds accounts, rents
safety deposit boxes Name of Bank, Depo	ository, etc.	ds accounts, rents
safety deposit boxes Name of Bank, Depo	s or maintains funds.	ds accounts, rents
safety deposit boxes Name of Bank, Depo	ository, etc.	ds accounts, rents
safety deposit boxes Name of Bank, Depo	s or maintains funds. pository, etc. Eagle Bank	ds accounts, rents
safety deposit boxes Name of Bank, Depo	s or maintains funds. pository, etc. Eagle Bank	ds accounts, rents
safety deposit boxes Name of Bank, Depo	Eagle Bank 2001 K St NW	ds accounts, rents
safety deposit boxes Name of Bank, Depo	Eagle Bank 2001 K St NW Washington CITY STATE	
safety deposit boxes Name of Bank, Depo	Eagle Bank 2001 K St NW Washington CITY STATE	
Safety deposit boxes Name of Bank, Depo	Eagle Bank 2001 K St NW Washington CITY STATE	
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Safety deposit boxes Name of Bank, Depo	Eagle Bank 2001 K St NW Washington CITY STATE	

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1A Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: