Image# 201806079113651696				PAGE 1 / 6
FEC FORM 1	STATEME ORGANIZ	_		
			Offic	ce Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
First In Freedom				
	824 S Milledge Ave, Ste 101			
ADDRESS (number and street)				
is changed)				<u> </u>
	Athens CITY ▲		GA 3060 STATE ▲	>
	ess ,paul@pdscompliance.	com		
(Check if address is changed)				
	Optional Second E-Mail Ac	ldress iance.com		
COMMITTEE'S WEB PAGE AI				
	D7 / Y Y Y Y 2018			
3. FEC IDENTIFICATION N		00540146		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
certify that I have examined	this Statement and to the bes	t of my knowledge and belief it	is true, correct and c	complete.
Type or Print Name of Treasur	er Kilgore, Paul, , ,			
Signature of Treasurer	ore, Paul, , ,	[Electronically Filed]	Date 06	07 / Y Y Y 2018
NOTE: Submission of false, error		may subject the person signing ION SHOULD BE REPORTED W		enalties of 2 U.S.C. §437
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	contact:	FEC FORM 1 (Revised 06/2012)

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TYPE OF (COMMITTEE
Candidat	te 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 Affiliat	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 Cor	mmittee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) F
Political A	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organizatio
	Corporation Corporation w/o Capital Stock Labor Organizati
	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 segregated fund or p 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.
Con	nmittees Participating in Joint Fundraiser
1.	
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

First In Freedom PAC

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

Mailing Address Relationship: Connected	PO Box 5053	3 														
		3														
Relationship: Connecte	Concord															
Relationship: Connecte			CITY							_ -	28027	<u> </u>		-		
	ed Organization	Affilia	ated Co	mmitte	e	Joint	Fundr	aising	Represe		re X	Leade			: Spo	onso
 Custodian of Records: Ide books and records. 	entify by name,	address	(phone	numbe	er c	ptiona	l) and	positio	on of th	e pers	son in _l	posse	ssion	of c	omn	ittee
Full Name																
Mailing Address																
														-		
Title or Position			CITY						STATE			ZI	o co	DE		
						Tel	ephon	e num	ber					-		
 Treasurer: List the name al any designated agent (e.g., 	nd address (ph assistant treas	one numb surer).	per op	otional)) of th	ne trea	surer	of the	commit	tee; a	nd the	name	and	addr	ess	of
Full Name Kilgore, F of Treasurer	Paul, , ,															
Mailing Address	824 S Milled	ge Ave, S	te 101													
	Athens		CITY						GA STATE		30605		- [. [] DE		
Title or Position						Tel	ephone	e numl	per [706	°−	534	L		778	D

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Goode, Michael, , ,
Mailing Address	824 S Milledge Ave, Ste 101
	Athens
	CITY STATE ZIP CODE
Title or Position	Jrer 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.

Wells F	Fargo	
Mailing Address	420 Montgomery St	
	San Francisco	CA 94104
	CITY	STATE ZIP CODE
Name of Bank, Depository, e	etc.	
BB&T		
	6659 Falls of Neuse Rd	
Mailing Address		
	Raleigh	NC 27615
	CITY	STATE ZIP CODE

FFC	Form	1 S	(Revised	02/2017)
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:
-(3) ()-			

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

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

Mailing Address	824 S Milledge Ave, Ste 101									
	Athens		GA	30605						
Relationship:	CITY	″▲	STATE A	ZIP CODE						
Connected Organization										

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name											
Mailing Address											
TITLE OR POSITION	7	CITY A	STATE ▲ ZIP CODE ▲								
Telephone Number -											

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.																										
Mailing Address	L																									
	L																									
CITY 🔺									STATE ▲ ZIP CODE ▲					Ξ 🔺	L.											

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

5(g) or (h).	Joint	Fundraising	Participant:
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1. [FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	C
4.	FEC ID number	С

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

1				
Mailing Address	P.O. BOX 97275			
Ū.				
				27624
Relationship:	CITY 🔺		STATE A	ZIP CODE
Connected	Organization Affiliated Committee	× Joint Fundrais	sing Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name			
Mailing Address			
TITLE OR POSITION		STATE A	ZIP CODE
	т	elephone Number	

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.	<u> </u>																												
Mailing Address																													
	L																												
																										- [
	CITY 🔺											STATE ▲ ZIP						С	CODE 🔺										