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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. THUNDERBOLT PAC 824 S Milledge Ave Ste 101 ADDRESS (number and street) (Check if address is changed) Athens 30605 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS thunderboltpac@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00574376 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. Kilgore, Paul, , , Type or Print Name of Treasurer Kilgore, Paul, , , [Electronically Filed] 80 16 2019 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

EEA	Form 1 (Revised 02/2009)	Page 2
	F COMMITTEE	1 aye 2
Candid	late 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. (Cominformation below.)	plete the candidate
Name of Candida		
Candida Party Af	3.1133	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida		
Party (Committee:	
(d)		(Democratic, Republican, etc.) Party
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected 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 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 F	undraising 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.	vo 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
(committees Participating in Joint Fundraiser	
1	. C	
2	. FEC ID number	
3	. FEC ID number	
2	.	

FEC Form 1 (Revise	ed 02/2009)	Page 3
Write or Type Committee Na	ame	
THUNDERBO	OLT PAC	
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
MARTHA MCSALLY	, 	
Mailing Address	PO BOX 19128	
Mailing Address	TUCSON AZ 8573 CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of the person in	possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; and the	e name and address of
Full Name Kilgore, of Treasurer	Paul, , ,	
Mailing Address	824 S Milledge Ave Ste 101	
	Athens GA 3060	
Title or Position Treasurer	CITY STATE 706 Telephone number	ZIP CODE 7780

Title or Position Assistant Treasurer Banks or Other Depositories: Lissafety deposit boxes or maintains Name of Bank, Depository, etc. Suntrust Bank Mailing Address PO Atla Atla Name of Bank, Depository, etc. BB&T 190	, , , , , , , , , , , , , , , , , , ,	
Designated Agent Mailing Address Mailing Address Title or Position Assistant Treasurer Banks or Other Depositories: Lissafety deposit boxes or maintains Name of Bank, Depository, etc. Suntrust Ba Mailing Address PO Atla Name of Bank, Depository, etc. BB&T 190		
Mailing Address Ath Ath Ath Assistant Treasurer Banks or Other Depositories: Lissafety deposit boxes or maintains Name of Bank, Depository, etc. Suntrust Bank Mailing Address PO Atla Name of Bank, Depository, etc. BB&T 190	4 S Milledge Ave Ste 101	
Title or Position Assistant Treasurer Banks or Other Depositories: Lissafety deposit boxes or maintains Name of Bank, Depository, etc. Suntrust Bank Mailing Address PO Atla Atla Name of Bank, Depository, etc. BB&T 190		
Title or Position Assistant Treasurer Banks or Other Depositories: Lissafety deposit boxes or maintains Name of Bank, Depository, etc. Suntrust Bank Mailing Address PO Atla Atla Name of Bank, Depository, etc. BB&T 190		
Banks or Other Depositories: Lissafety deposit boxes or maintains Name of Bank, Depository, etc. Suntrust Bank	nens GA 30605 CITY STATE Z	IP CODE
Name of Bank, Depository, etc. Suntrust Bank	Telephone number 706 - 50	34 7780
Name of Bank, Depository, etc. BB&T		accounts, rents
Name of Bank, Depository, etc. BB&T 190	Box 4418	
Name of Bank, Depository, etc. BB&T 190		
BB&T	anta GA 30302	
BB&T	CITY STATE Z	ZIP CODE
190		
Mailing Address	09 K Street NW	
L		
Li	ashington DC 120006	

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

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. 1		Participant:			
1			FEC ID	number	С
2.		<u> </u>	FEC ID	number	C
3.			FEC ID	number	C
4.			 FEC ID	number	С
Name of Any	Connected C	Organization, Affiliated Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spons
MCSALL	_Y VICTO	RY COMMITTE	1 1 1 1 1 1	1 1 1	
Mailing A	Address	228 S WASHINGTON STREET SUITE 115			
			<u> </u>		1 1 1 1 1 1 1 1 1
		ALEXANDRIA	1	VA	22314
Relation	ship:	CITY ▲		STATE A	ZIP CODE ▲
Designated A	mante Idontific				
		by name, address (phone number – optior	al)		
Full Name		by name, address (phone number – option	al)		
		by name, address (phone number – option	al)		
Full Name		by name, address (phone number – option	al)		
Full Name		by name, address (phone number – option	al)		
Full Name Mailing Ad		CITY A		STATE A	ZIP CODE A

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

FEC Form 1S (Revised 02/2017) for L

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5(g) o	r(h). Joint Fundraisir	ng Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundral	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	L GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identif	y by name, address (phone number – optional)		
8.	Designated Agent: Identif	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE ▲	ZIP CODE A
8.	Full Name	CITY A		
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or mail to boxes or mail to boxes. Chain	CITY A Tele pries: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or main that the company of Bank, Depository, etc.	CITY CITY Tele Tries: List all banks or other depositories in which the aintains funds.	STATE ▲	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or mail to boxes or mail to boxes. Chain	CITY CITY Tele ries: List all banks or other depositories in which the aintains funds. Bridge Bank	STATE ▲	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundr JS SENATE MAJORITY	aising Representative	e, or Leadership PAC Spon
Mailing Address	824 S MILLEDGE AVE STE 101		
ag / laa.eee			
	ATHENS	ı GA ı	30605
Dalatianahin			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint by by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representation	Leadership PAC S
esignated Agent: Identi		Fundraising Representation	Leadership PAC S
esignated Agent: Identi		Fundraising Representation	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY		
esignated Agent: Identiing Full Name Mailing Address	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

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1.			
		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	ted Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 9891		
	ARLINGTON	VA VA	22219
		STATE ▲ nt Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Sp
Conne			
esignated Agent: Ide	ected Organization Affiliated Committee		
Connection Connectic Connection C	ected Organization Affiliated Committee		
esignated Agent: Ide	acted Organization Affiliated Committee Jointify by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
Connection Connectic Connection Connection Connection Connection Connection Connectica Connection C	acted Organization Affiliated Committee		