PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Advance America Cash Advance Centers Inc. PAC 135 N. Church Street ADDRESS (number and street) (Check if address is changed) Spartanburg 29306 SC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS fecinfo@pass1.com (Check if address is changed) Optional Second E-Mail Address edobbins@advanceamerica.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00429001 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. Fulmer, Jr, James, S,, Type or Print Name of Treasurer Fulmer, Jr, James, S,, [Electronically Filed] 26 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) Only

Toll Free 800-424-9530 Local 202-694-1100

FF	C Form 1 (Revised 02/2009)	Page 2
TYPE (DF COMMITTEE	. 4,5 - 1
	date 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 o Candida		
Candida Party A		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o		
Party	Committee:	(Domogratic
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected 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 so committee. (i.e., nonconnected committee)	egregated 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 to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo 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.	vo or more political
(Committees Participating in Joint Fundraiser	
	1. FEC ID number C	
	2. FEC ID number C	
;	3. FEC ID number	
	4.	

FEC Form 1 (Re		Page 3
	nerica Cash Advance Centers Inc. PAC	
	ected Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
Advance America	a Cash Advance Centers Inc.	
	135 N. Church Street	
Mailing Address		
	Spartanburg SC 2	29306
	CITY STATE	ZIP CODE
Relationship: 🗶 Co	onnected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Record books and records. 	ds: Identify by name, address (phone number optional) and position of the perso	n in possession of committee
Full Name	llmer, Jr, James, S, ,	
	135 North Church Street	
Mailing Address		
	Spartanburg SC 12	29306
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	s 	342 5633
	ame and address (phone number optional) of the treasurer of the committee; and (e.g., assistant treasurer).	I the name and address of
Full Name Full of Treasurer	lmer, Jr, James, S, ,	
Mailing Address	135 North Church Street	
	Spartanburg SC 2	29306
Title or Position	CITY STATE	ZIP CODE
Treasurer	864 	342 5633

	m 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Swensen, Dawn, , ,	
Mailing Address	135 North Church Street	
	Spartanburg SC 29306	
Title or Position		P CODE
Assistant Treas	surer Telephone number 864 - 34.	2 5691
Name of Bank,	Depository, etc. First Horizon	1 1 1 1 1 1
-	Depository, etc. First Horizon PO Box 84	
Name of Bank,	PO Box 84	
Name of Bank,	PO Box 84 Memphis TN 38101	P CODE
Name of Bank,	PO Box 84 Memphis CITY STATE ZI	IP CODE
Name of Bank, Mailing Address	PO Box 84 Memphis CITY STATE ZI	IP CODE
Name of Bank, Mailing Address	Depository, etc. First Horizon PO Box 84 Memphis TN 38101 CITY STATE ZI Depository, etc.	P CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. First Horizon PO Box 84 Memphis TN 38101 CITY STATE ZI Depository, etc.	P CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. First Horizon PO Box 84 Memphis TN 38101 CITY STATE ZI Depository, etc.	P CODE

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This registration is being amended to change the PAC email and bank information.

Form/Schedule: Transaction ID: