Image# 15951099796				03/27/2015 09 : 46
FEC FORM 1	STATEMEN ORGANIZ		0#	
1. NAME OF	(Check if name	Example: If typing, type		ce Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
Go Big Go Bold	PAC, Inc.			
ADDRESS (number and street)	722 12th Street, N.W.			
(Check if address	4th Floor			
is changed)	Washington		DC 2000	5
			L⊥⊥ L⊥ STATE ▲	
COMMITTEE'S E-MAIL ADDR	_ss _fed@goscottgo.com			
<ul> <li>(Check if address is changed)</li> </ul>				
	Optional Second E-Mail Add	dress		1
COMMITTEE'S WEB PAGE AD	Www.goscottgo.com			
	24 / Y Y Y Y 2015			
3. FEC IDENTIFICATION N		00573147		
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 Treasur	er Robert Adams			
Signature of Treasurer	ert Adams	[Electronically Filed]	Date 03	27 27
NOTE: Submission of false, error	neous, or incomplete information ANY CHANGE IN INFORMATION	may subject the person signing t ON SHOULD BE REPORTED W		enalties of 2 U.S.C. §437g.
Office Use Only		For further information constraints for the formation of the formation commission of the formation of the fo		(Revised 06/2012)

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F	EC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE	OF C	OMMITTEE	
Cane	didate	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. (Complein information below.)	ete the candidate
Name Candi			
Candi Party	idate Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Part	y Con	nmittee:	
(d)			emocratic, publican, etc.) Party.
Polit	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	Х	This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated 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.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised		Page <b>3</b>
Write or Type Committee Nam	ie	
Go Big Go Bold	d PAC, Inc.	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership F	PAC Sponsor
Mailing Address		
	CITY STATE ZIP	CODE
Relationship: Connecte	ed Organization	ship 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.

Robert Ad	ms
Full Name	
Mailing Address	217 Oak Lee Drive
	Sutie 10171
	Ranson     WV     25438       -     -     -
Title or Position	CITY STATE ZIP CODE
Treasurer	

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	Robert Adams		
Mailing Address	217 Oak Lee Drive		
	Sutie 10171		
			25438
	CITY	STATE	ZIP CODE
Title or Position Treasurer		elephone number	

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																												
Mailing Address																												
																	L			L								
							CI	TΥ									ST/	AT E	_				ZI	P(		DE		
Title or Position																												
												Tel	eph	ione	e n	uml	ber											

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.

	Branch Banking & Trust Company	
Mailing Address	29 Keyes Ferry Road	
	Charles Town	WV [25414
	CITY	STATE ZIP CODE
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE

## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

Amendment to correct clerical error in committee type on original filing.

Form/Schedule: Transaction ID: