**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Michigan Values PAC PO Box 327 ADDRESS (number and street) (Check if address is changed) Romeo 48065 MI CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS mivalues@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 2020 C00764886 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] 04 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2	
TYPE OF COMMITTEE:		
Candidate Committee:		
(a) This committee is a principal campaign committee. (Complete th	e candidate information below.)	
(b) This committee is an authorized committee, and is NOT a princ information below.)	ipal campaign committee. (Complete the candidate	
Name of Candidate		
Candidate Party Affiliation Office Sought: House	Senate President District	
(c) This committee supports/opposes only one candidate, and is NO	OT an authorized committee.	
Name of Candidate		
Party Committee:		
(d) This committee is a (National, State or subordinate) committee	of the (Democratic, Republican, etc.) Party	
Political Action Committee (PAC):		
(e) This committee is a separate segregated fund. (Identify connected	ed organization on line 6.) Its connected organization is a	
Corporation Corporation w/o	Capital Stock Labor Organization	
Membership Organization Trade Associatio	n Cooperative	
In addition, this committee is a Lobbyist/Registrant PA	C.	
(f) This committee supports/opposes more than one Federal candid committee. (i.e., nonconnected committee)	date, and is NOT a separate segregated fund or party	
In addition, this committee is a Lobbyist/Registrant PA	C.	
In addition, this committee is a Leadership PAC. (Iden	tify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).		
In addition, this committee is a Lobbyist/Registrant PA	С.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).		
In addition, this committee is a Lobbyist/Registrant PA	C.	
Joint Fundraising Representative:		
(1)	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.	
(j) 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.		
Committees Participating in Joint Fundraiser		
1.	C	
	C	

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W	rite or Type Committee Name		
	Michigan Value	es PAC	
6.		ganization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
	Mailing Address	11540 34 Mile Road	
		Bruce Township	48065
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Represen	tative Leadership PAC Sponso
	Custodian of Records: Ident books and records.	fy by name, address (phone number optional) and position of the perso	on in possession of committee
	Kilgore, Pa	ıl, , ,	
	Full Name		
	Mailing Address	824 S Milledge Ave Ste 101	
		1	
		Athens	30605
		0.500	
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	Treasurer	Telephone number	706 - 534 - 7780
	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee ssistant treasurer).	e; and the name and address of
	Full Name Kilgore, Pa	ıl, , ,	
	of Treasurer		
	Mailing Address	824 S Milledge Ave Ste 101	
		Athens	30605
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	706 - 534 - 7780

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Full Name of Designated Agent	Goode, Michael, , ,				
Mailing Address	824 S Milledge Ave Ste 101				
	Athens G	GA 30605 -			
Title or Position		ATE ▲ ZIP CODE ▲			
Assistant Treas		706   -   534   -   7780			
	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.				
	Comerica				
Mailing Address					
	Clinton Twp.	MI , 48035 , ,			
		ATE ▲ ZIP CODE ▲			
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲ STA	ATE ▲ ZIP CODE ▲			