STATEMENT OF

PAGE 1 / 10 ·

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. **HUDSON FOR CONGRESS** PO BOX 5053 ADDRESS (number and street) (Check if address is changed) CONCORD 28027 NC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS hudson@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.RichardHudsonForCongress.com (Check if address is changed) DATE 2019 C00504522 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] 13 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

FEC	C For	rm 1 (Revised 02/2009)	Page 2
TYPE C	OF C	OMMITTEE	
Candi	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		HUDSON, RICHARD, L., , Jr.	<u></u>
Candida		Office Sought: X House Senate President	State
Party Af	milatio	on REP Sought: X House Senate President	District 08
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida			
Party (Com	mittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.
Politic	al A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor-	nected 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 secommittee. (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	und	raising 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.	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
(Comr	mittees Participating in Joint Fundraiser	
1	1.	FEC ID number	
2	2.	FEC ID number	
3	3.	FEC ID number	
2	4.		

1		
FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Name	e	
HUDSON FOR	CONGRESS	
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representati	ive, or Leadership PAC Sponsor
HUDSON FREEDOM	FUND	
Mailing Address	228 S WASHINGTON ST STE 115	
	ALEXANDRIA VA	22314
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position of the	e person in possession of committee
Kilgore, P	aul, , ,	
Full Name	824 S Milledge Ave, Ste 101	
Mailing Address		
		00005
	Athens	30605
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	706 - 534 - 7780
8. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the commit assistant treasurer).	tee; and the name and address of
Full Name Kilgore, Pa	aul, , ,	
Mailing Address	824 S Milledge Ave, Ste 101	
	Athens	30605
	CITY STATE	ZIP CODE
Title or Position Treasurer		706 - 534 - 7780
1		

	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Ü		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Mailing Address	Bank of America 368 George W Liles Parkway NW Concord NC 128027	
Mailing Address	368 George W Liles Parkway NW Concord NC 28027	
Mailing Address Name of Bank, E	368 George W Liles Parkway NW Concord NC 28027 CITY STATE	ZIP CODE
	368 George W Liles Parkway NW Concord NC 28027 CITY STATE	ZIP CODE
Name of Bank, [368 George W Liles Parkway NW Concord CITY STATE Depository, etc. Wells Fargo Bank	ZIP CODE

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

FEC Form 1S (Revised 02/2017)

Page _5_ **of** _10__

5(g)	or(h). Joint Fundraisin	g Participant:	
	1.		FEC ID number
	2		FEC ID number
	3.		FEC ID number
	4.		FEC ID number
6.	Name of Any Connected Team Telluride 20	_	aising Representative, or Leadership PAC Sponsor
	Mailing Address	824 S Milledge Ave Ste 101	
		Athens	, GA , 30605
	Relationship:		
		CITY ▲	STATE ▲ ZIP CODE ▲
	Connected	I Organization Affiliated Committee X Joint	Fundraising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)	
	Full Name		
	Mailing Address		
		1	
	TITLE OR POSITION	CITY A	STATE ▲ ZIP CODE ▲
		I	lephone Number
9.	safety deposit boxes or ma	intains funds.	he committee deposits funds, holds accounts, rents
	Name of Bank, Caden Depository, etc.	ce Bank	
	Mailing Address	2234 W Broad St	
		Athens	GA 30606
		CITY ▲	STATE ▲ ZIP CODE ▲

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

5(g) or ((h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
-				
6. N		Organization, Affiliated Committee, Joint Fundral	ising Representative	e, or Leadership PAC Sponsor
	TAKE BACK THE	HOUSE 2020		
	Mailing Address	PO BOX 30844		
	Mailing Address			
		BETHESDA	ı MD ı	20824-0844
	Deleteration			
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Represent	ative Leadership PAC Sponsor
8. D				
	Full Name	by name, address (phone number – optional)		
		by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	CITY	STATE A	ZIP CODE A
	Full Name	CITY A	STATE A	
9. B s.	Full Name Mailing Address TITLE OR POSITION	CITY A Tele ies: List all banks or other depositories in which the	ephone Number	ZIP CODE A
— 9. B s.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mailane of Bank, Depository, etc.	CITY A Tele ies: List all banks or other depositories in which the	ephone Number	ZIP CODE A

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

5(g) or (h)). Joint Fundraising	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	C
	me of Any Connected (Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
Ĺ				
	Mailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	GA GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
8. Des		Organization Affiliated Committee Solution Joint Figure 5. Affiliated Committee Solution Figure 5. Affiliated Figure	undraising Represent	ative Leadership PAC Sponsor
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	ephone Number	
safe	ety deposit boxes or mai	ies: List all banks or other depositories in which the ntains funds.	e committee deposit	s funds, holds accounts, rents
	me of Bank, pository, etc.			
	Mailing Addraga	1		
	Mailing Address			
	Mailing Address			

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

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
HEALTH FIRST	COMMITTEE		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC Sp
	fy by name, address (phone number – optional)	r Fundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identi		T-Fundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identi		Fundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identi		T-Fundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: 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,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
HRW VICTORY	FUND		
	204 CANULEDOS AVECTS 404		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee Joinfy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail to the content of the conte	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi 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 pries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi 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 pries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi 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 pries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi 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 pries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A

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

5(g) or (h).	Joint Fundraising	Participant:			
1.				FEC ID number	С
2.				FEC ID number	С
3.				FEC ID number	С
4.				FEC ID number	C
	of Any Connected C		Committee, Joint Fund	raising Representativ	e, or Leadership PAC Sponsor
ı	Mailing Address	824 S. MILLEDGE AVE			
	J	SUITE 101			
		ATHENS		GA	30605
F	Relationship:		CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliate	ed Committee X Joint	t Fundraising Represent	ative Leadership PAC Sponsor
8. Design	nated Agent: Identify	by name, address (phon	e number – optional)		
Ful	II Name				
Ма	uiling Address				
TI	TLE OR POSITION •	, c	ITY 🛦	STATE ▲	ZIP CODE A
ті 	TLE OR POSITION •	C	1	STATE ▲ elephone Number	ZIP CODE A
9. Banks safety Name		es: List all banks or othe	та	elephone Number	ZIP CODE ZIP CODE ts funds, holds accounts, rents
9. Banks safety Name Deposi	or Other Depositorion deposit boxes or main of Bank,	es: List all banks or othe	та	elephone Number	
9. Banks safety Name Deposi	or Other Depositorion deposit boxes or main of Bank, tory, etc.	es: List all banks or othe	та	elephone Number	
9. Banks safety Name Deposi	or Other Depositorion deposit boxes or main of Bank, tory, etc.	es: List all banks or other tains funds.	та	elephone Number	