

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER 2010 MAY -6 PM 4:35

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

FREEDOM PAC

ADDRESS (number and street)

P.O. BOX 2485

(Check if address is changed)

SPRINGFIELD VA 22152

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

FREEDOMPAC@CONCENTRICOFFICE.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

05/06/2010

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

NEW (N) OR AMENDED (A)

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 Treasurer

ROBERT F. CARLIN

Signature of Treasurer

[Handwritten Signature]

Date

05/06/2010

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.

Table with 5 columns and 1 row for Office Use Only.

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

10030322994

5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT 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 organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) 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.
- (h) 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. _____ FEC ID number: C _____
- 2. _____ FEC ID number: C _____
- 3. _____ FEC ID number: C _____
- 4. _____ FEC ID number: C _____

10030322995

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

PAUL BROWN

Mailing Address

PO BOX 1512

Athen GA 30601

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership 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.

Full Name

ROBERT F. CARLIN

Mailing Address

PO BOX 2485

SPRINGFIELD VA 22152

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 703-310-6125

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 F. CARLIN

Mailing Address

PO BOX 2485

SPRINGFIELD VA 22152

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number 703-310-6125

10030322999

Full Name of Designated Agent

Mailing Address

Title or Position Telephone number

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 and TRUST

Mailing Address 119109 K ST NW

WASHINGTON DC 20006-1156

CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE

10030322997

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt
5/6/10

USPS First Class Mail Postmarked

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Next Business Day Delivery

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Other (Specify): Date of Receipt or Postmarked

Jac P
PREPARER

5/7/10
DATE PREPARED

10050522998