		RECEIVED FEC MAIL CENTER
		2010 SEP 21 AM 9: 12
FFO	STATEMENT OF	
FEC FORM 1	ORGANIZATION	
	(See instructions)	Office use only
1. NAME OF COMMITTEE (in f	(Check if name Example: If typying, type is changed) over the lines	12FE4M5
Take Back The	House GA Committee	
ADDRESS (number and s	street) 264 N. Lumpkin St #202	
▼ (Check if address		
is changed)	Athens	
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	paul@pdscompliance.com	
is changed)		
COMMITTEE'S WEB		<u>.</u>
2. DATE 09		
3. FEC IDENTIFICA	TION NUMBER C	
4. IS THIS STATEM	ENT X NEW (N) OR AMENDED (A)	-
-	ned this Statement and to the best of my knowledge and belief it is true, correct an	id complete
Type or Print Name of Signature of Treasuro		Date 0,9 15 2010
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED V	
Office	For further information o	eontact: EEC FORM 1

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		FEC F	orm 1 (Revised 02/2009)	Page 2	
5.	TYPE	OF CC	MMITTEE (Check One)		
	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 commination below.)	ittee. (Complete the candidate	
	Name Cand				
	Cand Party	lidate Affiliati	on Sought: House Senate	State President District	
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized cor	nmittee.	
	Name Cand				
	Party	Comm	procession and an electrometeric to the fact tables	an a	
	(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:				
		Contractor 2	Corporation Corporation w/o Capital Stock	Labor Organization	
			Membership Organization Trade Association		
	(f)	Taracard	This committee supports/opposes more than one Federal candidate, and is NOT a se committee. (i.e., nonconnected committee)	eparate segregated 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 Fundraising Representative:				
	(g)	X	This committee collects contributions, pays fundraising expenses and disburses net p committees/organizations, at least one of which is an authorized committee of a feder		
	(h)		This committee collects contributions, pays fundraising expenses and disburses net p committees/organizations, none of which is an authorized committee of a federal can		
		Com	nittees Participating in Joint Fundraiser		
			MIKE KEOWN FOR CONGRESS FEC ID number 1. FEC ID number	C C00465500	
			2. AUSTIN SCOTT FOR CONGRESS INC 2. FEC ID number	C C00482737	
			3. FEC ID number		
			4 FEC ID number	langun de seine generalisen de seine s Constant de seine de s Seine seine de seine s	

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FEC Form 1 (Revise Write or Type Committee Na			
Take Back The Hous			
Name of Any Connected	l Organization, Affiliated Committee, Joint Fundraising Represer	ntative, or Le	eadership PAC Sponsor
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Mailing Address		<u> </u>	
			<u></u>
	CITY	STATE 🛦	
Relationship:	ation Affiliated Committee Joint Fundraising Rep	resentative	Leadership PAC Spons
	Identify by name, address, (phone number optional), and tee books and records.		the person in
possession of Commit			the person in
possession of Commit		STATE &	the person in
possession of Commit Full Name Mailing Address Title or Position ♥ Treasurer: List the na name and address of Full Name	ttee books and records.	STATE A	
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possession of Commit Full Name Mailing Address , Title or Position ♥ Treasurer: List the na name and address of Full Name	tee books and records.	STATE A	
possession of Commit Full Name Mailing Address , Title or Position ♥ , Treasurer: List the na name and address of Full Name of Treasurer	tee books and records.	STATE A	
possession of Commit Full Name Mailing Address , Title or Position ♥ , Treasurer: List the na name and address of Full Name of Treasurer	ttee books and records.	STATE A	

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anks or Other Deposit afety deposit boxes or m lame of Bank, Depositor	naintains funds.	the committee deposits funds,	noias accounts, rents
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	T	Felephone number	
le or Position ∀	CITY A		
Mailing Address		<u> </u>	
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Full Name of Designated Agent			

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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.				
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USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
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Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
h	9/21/10			
PREPARER (3/2005)	DATE PREPARED			

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