Only

STATEMENT OF

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FORM 1		OF	RGAN	IZA ⁷	ΓΙΟ	N													
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NAME OF COMMITTEE (ir	n full)		heck if name changed)	е	Examp over the	ole:If ty ne lines		type		12I	E4	M5	_	_					
Jerry Evans	for Co	ngress										<u> </u>						<u> </u>	
ADDRESS (number a	nd atract)	1750 W O	gden Avenue			1 1	1 1		1	1 1	1	1 1	ı	1	1 1	ı		1 1	ı
(Check if a	•	P O Box 4	074																
is changed		Naperville								. 11			COE (27					
		CIT								STAT	 E _	L	6056) 	ZI	 P C	DDE 4	<u> </u>	
COMMITTEE'S E-MA	AIL ADDRE	ESS																	
(Check if a is changed		evans@p	dscomplianc	e.com					ı				ı	ı		ı			
is changed	۵)	Optional S	econd E-Ma	il Addres	ss														_
			scompliance.c																
COMMITTEE'S WEB	B PAGE AD	DRESS (URI	L)																
(Check if a	address		evansforcong	ess.com															ı
is changed	d)																		
2. DATE 0			2024																
3. FEC IDENTIFIC	CATION N	UMBER ▶	C	C008	50255														
4. IS THIS STATE	MENT	NEW (N) O	R	×	AMI	ENDEI	O (A)											
I certify that I have e	examined t	his Statemen	t and to the	best of	my kno	owledge	e and	belief	it is	true	cor	rect a	and	com	plete				
Type or Print Name	of Treasure	er <u>Kilgore, P</u>	aul, , ,																
Signature of Treasure	er Kilgo	ore, Paul, , ,							D	ate	T.	09	_ ′	0	5	′	202	24	Y
NOTE: Submission of	false, error		mplete inform	_				-	-					oena	lties (of 52	U.S.(C. §30	0109.
Office Use					Fe	or furthe	lection (Commi		act:							M 1		

Toll Free 800-424-9530

Local 202-694-1100

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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 information below.)	the candidate
Name of Candidate Evans, Jerry, , ,	
Candidate Party Affiliation REP Office Sought: House Senate President	State IL District 11
(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 Republication	atic, an, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	cted organization is a:
Corporation Corporation w/o Capital Stock Labor	Organization
Membership Organization Trade Association Coope	erative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ited 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid	PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) 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
(j) 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.	or more political
Committees Participating in Joint Fundraiser	
1	

	FEC Form 1 (Revised 0)	2/2009)		Page 3
٧	/rite or Type Committee Name			
	Jerry Evans for C			
6.	-	ganization, Affiliated Committee, Joi	nt Fundraising Representat	ive, or Leadership PAC Sponsor
	JERRY EVANS VICT	ORY COMMITTEE		
	Mailing Address	824 S MILLEDGE AVE		
		STE 101		
		ATHENS	GA	30605
		CITY ▲	STATE	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	X Joint Fundraising Repres	sentative Leadership PAC Sponso
	_			_
7.	Custodian of Records: Idention books and records.	fy by name, address (phone number c	pptional) and position of the pe	erson in possession of committee
	Kilgore, Pa	ال, , ,		
	Full Name	204 0 Mills day Avenue		
	Mailing Address	824 S Milledge Avenue		
		Ste 101		
		Athens	GA	
		CITY ▲	STATE	ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number	706 534 7780
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) consistant treasurer).	of the treasurer of the commi	ittee; and the name and address of
	Full Name Kilgore, Part of Treasurer	JI, , ,		
		824 S Milledge Avenue		
	Mailing Address	Ste 101		
		Athens	GA	30605
		CITY ▲	STATE	ZIP CODE ▲
	Title or Position ▼			700 504
	Treasurer		Telephone number	706 - 534 - 7780

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Full Name of Designated Agent	Goode, Michael, , ,		
Mailing Address	Ste 101		
	Athens	GA	30605
	CITY A	STATE ▲	ZIP CODE ▲
Title or Position Assistant Treasur		number 7	706
	Depositories: List all banks or other depositories in which the comn es or maintains funds.	nittee deposits f	funds, holds accounts, rents
Name of Bank, D	epository, etc.		
	Wheaton Bank		
Mailing Address	Box 32		
	Rosemont	IL I	60018
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Classic City Bank		
Mailing Address	2365 W Broad St		
	Athens	GA	30606
	CITY ▲	STATE ▲	ZIP CODE ▲