**FEC** 

## **STATEMENT OF**

FORM 1	ORGANIZATIO	N		
1 OTTIVI 1	(See instructions)		Of	fice use only
NAME OF COMMITTEE (in f	ull) (Check if name Exa	ample: If typying, type r the lines	12FE4M5	
AZ-08 CONGR	ESSIONAL VICTORY COMMITTEE			
ADDRESS (number and s	264 N. Lumpkin St #202			
(Check if address		1111111		
is changed)	Athens		GA L	30601   -
	CITY▲	•	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI	_ ADDRESS (Please provide only one e-mail add			
(Check if address X is changed)	REVERSETHEVOTE@GMA	IL.COM		
is onangos,				
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
_				
(Check if address is changed)				
2. DATE	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER C CO	0470401		
4. IS THIS STATEM	ENT NEW (N) OR	AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of my knowledge a	nd belief it is true, correct and	d complete	
,		,		
Type or Print Name of	Freasurer Paul Kilgore			
Signature of Treasurer	Electronically Filed by Paul Kilgore		Date 08	30 / 2010
NOTE: Submission of fal	se, erroneous, or incomplete information may subject  ANY CHANGE IN INFORMATION SH			of 2 U.S.C. §437g.
Office Use Only		For further information confederal Election Commission Toll Free 800-424-9530	ontact:	FEC FORM 1 (Revised 02/2009)

	FE	EC Form 1 (Revised 02/2009)	Page 2	
5.		DF COMMITTEE (Check One) ate 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 cinformation below.)	mplete the candidate  State Sident District  (Democratic, Republican, etc.) Party.  onnected organization is a: Labor Organization Cooperative  gregated fund or party  or two or more political te.	
	Name of Candida			
	Candida Party Af			
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name of Candida			
	Party Co	Committee:		
	(d)	(National, State (D) This committee is a (or subordinate) committee of the Re	emocratic, epublican,etc.) Party.	
Political Action Committee (PAC):				
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected or	rganization is a:	
		Corporation Corporation w/o Capital Stock Labor	Organization	
		Membership Organization Trade Association Coope	erative	
	400	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 fu committee. (i.e., nonconnected committee)	nd 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 Fu	indraising Representative:		
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mocommittees/organizations, at least one of which is an authorized committee of a federal candidate.	ore political	
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mocommittees/organizations, none of which is an authorized committee of a federal candidate.	ore political	
	(	Committees Participating in Joint Fundraiser		
		1 FEC ID number		
		2. FEC ID number		
		3. FEC ID number		
		.   FEC ID number   C		

**Treasurer** 

	FEC Form 1 (Revised 02	2/2009)		Page <b>3</b>
Write	te or Type Committee Name	,		
		L VICTORY COMMITTEE		
	Name of Any Connected Org	ganization, Affiliated Committee, Joint Fundrai	sing Representative, or Leaders	ship PAC Sponsor
1				
		264 N. Lumpkin St #202		
N	Mailing Address			
		Athens	L GA L	30601
		CITY	STATE 🛕	ZIP CODE
F	Relationship:  Connected Organization	Affiliated Committee X Joint Fo	undraising Representative	Leadership PAC Sponsor
r F	oossession of Committee  Full Name  Mailing Address	entify by name, address, (phone number books and records.		
T	Title or Position ♥	CITY A	STATE	ZIP CODE A
_			Telephone number =	
1		and address (phone number optional) of designated agent (e.g., assistant treasure		ee; and the
ı	Mailing Address	264 N. Lumpkin St #202		
		Athens	GA	30601
-	Title or Position ♥	CITY A	STATE <b>▲</b>	ZIP CODE A

706

Telephone number

534

7780

Full Name of Designated Agent  Mailing Address   Title or Position ▼ CITY A STATE A ZIP CODE A  Telephone number
Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲  ———————————————————————————————————
Telephone number – –
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.
SunTrust Bank PO Box 4418
Mailing Address
Atlanta
<u> </u>
CITY △ STATE △ ZIP CODE △
CITY △ STATE △ ZIP CODE △
CITY A STATE A ZIP CODE A  Name of Bank, Depository, etc.
CITY A STATE A ZIP CODE A  Name of Bank, Depository, etc.
CITY A STATE A ZIP CODE A  Name of Bank, Depository, etc.

Banks or Other Depositories safety deposit boxes or maintain		nittee deposits funds, hol	ds accounts, rents
Name of Bank, Depository, etc.			[ ADDITIONAL ]
Mailing Address			
	CITY 🛆	STATE <b>⊿</b>	ZIP CODE 🛕
		SIAILA	
Name of Any Connected Org	anization, Affiliated Committee, Joint Fundraising Re	presentative, or Leade	[ ADDITIONAL rship PAC Sponsor
KELLY FOR CONGRESS			
Mailing Address	PO BOX 89520		
	TUCSON	ı AZ ı	85752
elationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Re	epresentative Lea	dership PAC Sponsor
Designated Amount			[ ADDITIONAL ]
Designated Agent			
Full Name			
Mailing Address			
			_
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
Title of Position \	CITE	SIAIE	ZIP CODE A
	Teleph	none number	
loint Eundroiser Partisinant			[ ADDITIONAL ]
Joint Fundraiser Participant			- 1
	F	EC ID number	