Only

STATEMENT OF

PAGE 1/7 =

FORM 1		0	RGAN	IZATI	ON						Office	e Use	Only			
NAME OF COMMITTEE (ir	n full)		Check if names changed)		cample:If ty		ре	12	FE4	М5	Office	ose '	Offig			
Greene for C	Congre	SS			1 1 1 1											Ш
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ADDDECC (3 Central	Plaza													
ADDRESS (number a	•	No. 142														
is changed	d)	Rome	TY 🛦					GA STA	TE A		30161		ZIP (- L	<u> </u>	
COMMITTEE'S E-MA	AIL ADDRE	SS														
X ◀ (Check if a is changed		jason@ı	tastrategy.cor	m 												
			Second E-Ma trategy.com	il Address												Ш
COMMITTEE'S WEB X ✓ (Check if a is changed	address	•	RL) vw.mtgforamer	ica.com												
2. DATE 08		2 / Y	y y y 2023													
3. FEC IDENTIFIC	CATION N	JMBER ▶	. C	C007082	289											
4. IS THIS STATEM	MENT	NEW	(N) O I	R	× ам	ENDED	(A)									
I certify that I have e	examined th	nis Stateme	nt and to the	best of my	knowledg	e and be	elief it	is true	e, cori	rect a	nd c	omple	ete.			
Type or Print Name	of Treasure	r <u>Boles, Ja</u>	ason, D, ,													
Signature of Treasure	er Boles	s, Jason, D,	,				_	Date		08	/	02	1	20	23	Y
NOTE: Submission of	false, erron		omplete inform								he pe	naltie	s of 5	2 U.S.	C. §3	30109.
Office Use					Federal E	er information Co 800-424-9	mmissio							RM 5/2012)		— I

Local 202-694-1100

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EC	Form 1 (Revised 03/2022) Page 2	
	YPE OF COMMITTEE:	
	andidate Committee:	
	This committee is a principal campaign committee. (Complete the candidate information below.)	
	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)	
	Name of Candidate Greene, Marjorie, Taylor, ,	_
	Candidate Party Affiliation REP Office Sought: House Senate President District 14	
(This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	_
	arty Committee:	
	This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party	
ı	olitical Action Committee (PAC):	
(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.	
	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.)	
(This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
(This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
,	oint Fundraising Representative:	
(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.	
(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. C	
	2. C	

	FEC Form 1 (Revised	02/2009)	Page 3
٧	Vrite or Type Committee Nam	ne	
	Greene for Con	ngress	
6.	-	Organization, Affiliated Committee, Joint Fundraising Representat	
	MARJORIE TAYLO	OR GREENE'S PEOPLE OVER POLITICIANS COMM	MITTEE
	Mailing Address	PO BOX 1575	
		ROSWELL	30077
		CITY ▲ STATE	ZIP CODE ▲
	Balatianakia Domasak		
	Relationship: Connecte	ed Organization Affiliated Organization X Joint Fundraising Repres	sentative Leadership PAC Sponso
7.		ntify by name, address (phone number optional) and position of the pe	erson in possession of committee
	books and records.		
	Boles, Ja	ason, D, ,	
	ruii name	PO Box 1483	
	Mailing Address	FO BOX 1463	
		Roswell	30077
		CITY ▲ STATE	ZIP CODE ▲
	Title or Position ▼	OIT = STATE	ZII GODE Z
	Treasurer		404 474 7226
		Telephone number	
	Traceurer Liet the name of	and address (phone number _ optional) of the traceurer of the commi	ittage and the name and address of
8.	any designated agent (e.g.	and address (phone number optional) of the treasurer of the commi , assistant treasurer).	tiee, and the name and address of
	Full Name Boles, Ja	ason, D, ,	
	of Treasurer		
	Mailing Address	PO Box 1483	
		Roswell , GA	1 130077
		CITY ▲ STATE	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	404 - 474 - 7226

	FEC Form 1	(Revised 02/2009)	Page 4
	Full Name of Designated Agent Mailing Address	Thompson, Rick, , , PO Box 1483 Roswell GA 3	30077
	Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
	Assistant Treasu]
-		Depositories: List all banks or other depositories in which the committee deposits funds ees or maintains funds.	, holds accounts, rents
	Name of Bank, D	epository, etc.	
	Mailing Address	ServisFirst Bank 300 Galleria Parkway SE Suite 350 Atlanta CITY STATE	0339 ZIP CODE A
	Name of Bank, D	epository, etc.	
	Mailing Address	Middletown Valley Bank 24 W Main Street	
		Middletown CT 2	1740
		CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
PUT AMERICA FIRS	ST JOINT FUNDRAISING COMMITTEE		
Mailing Address	PO BOX 1575		
	ROSWELL	GA	30077
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	fy by name, address (phone number - optional		
	tino, Stefan, , ,)	1
Passan			
Passan Full Name	tino, Stefan, , ,		
Passan Full Name	tino, Stefan, , ,	DC	20036
Passan Full Name Mailing Address	tino, Stefan, , , 1050 Connecticut Ave, NW Suite 500 Washington		20036 ZIP CODE ▲
Passan Full Name	tino, Stefan, , , 1050 Connecticut Ave, NW Suite 500 Washington	DC	
Passan Full Name Mailing Address TITLE OR POSITION Attorney In Fact	tino, Stefan, , , 1050 Connecticut Ave, NW Suite 500 Washington CITY ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE ZIP CODE s funds, holds accounts, rents
Passan Full Name Mailing Address TITLE OR POSITION Attorney In Fact Panks or Other Deposite afety deposit boxes or management of Bank,	tino, Stefan, , , 1050 Connecticut Ave, NW Suite 500 Washington CITY ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE ZIP CODE s funds, holds accounts, rents
Passan Full Name Mailing Address TITLE OR POSITION Attorney In Fact anks or Other Deposite afety deposit boxes or make the property of the position of the property of the position of the property of the position of the property of the	tino, Stefan, , , 1050 Connecticut Ave, NW Suite 500 Washington CITY ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE ZIP CODE s funds, holds accounts, rents
Passan Full Name Mailing Address TITLE OR POSITION Attorney In Fact anks or Other Deposite afety deposit boxes or make the property of the position of the property of the position of the property of the position of the property of the	tino, Stefan, , , 1050 Connecticut Ave, NW Suite 500 Washington CITY ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE ZIP CODE s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

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

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Page	of	1	

h). Joint Fundraisi r	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	paining Panyagantatio	ve av Landavskin DAC Snans
-	RIE TAYLOR MRS., , ,	alsing nepresentative	
Mailing Address	413 SHORTER AVENUE		
	SUITE 103		
	ROME	GA GA	30165
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Represen	tative X Leadership PAC Sp
	y by name, address (phone number – optional) erek, , ,	Fundraising Represen	tative X Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Represen	tative X Leadership PAC Sp
esignated Agent: Identif Ross, D Full Name	y by name, address (phone number – optional) erek, , , 300 Independence Avenue SE		
esignated Agent: Identif Ross, D Full Name	y by name, address (phone number – optional) erek, , ,	Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif Ross, D Full Name	y by name, address (phone number – optional) erek, , , 300 Independence Avenue SE Washington		
esignated Agent: Identif Ross, D Full Name Mailing Address	y by name, address (phone number – optional) erek, , , 300 Independence Avenue SE Washington CITY	DC	20002
Ross, D Full Name Mailing Address TITLE OR POSITION Attorney In Fact anks or Other Deposite afety deposit boxes or materials.	y by name, address (phone number – optional) erek, , , 300 Independence Avenue SE Washington CITY Teleportes: List all banks or other depositories in which	STATE A	20002 ZIP CODE ▲ 202 – 937 – 230
Ross, D Full Name Mailing Address TITLE OR POSITION Attorney In Fact anks or Other Deposite afety deposit boxes or make the second process of the secon	y by name, address (phone number – optional) erek, , , 300 Independence Avenue SE Washington CITY Teleportes: List all banks or other depositories in which	STATE A	20002 ZIP CODE ▲ 202 – 937 – 230
Ross, D Full Name Mailing Address TITLE OR POSITION Attorney In Fact anks or Other Deposite afety deposit boxes or materials.	y by name, address (phone number – optional) erek, , , 300 Independence Avenue SE Washington CITY Teleportes: List all banks or other depositories in which	STATE A	20002 ZIP CODE ▲ 202 – 937 – 230
Ross, D Full Name Mailing Address TITLE OR POSITION Attorney In Fact anks or Other Deposite afety deposit boxes or make the second process of the secon	y by name, address (phone number – optional) erek, , , 300 Independence Avenue SE Washington CITY Teleportes: List all banks or other depositories in which	STATE A	20002 ZIP CODE ▲ 202 – 937 – 230

FEC Form 1S (Revised 02/2017)

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

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Page	of '	

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
MTG VICTORY FU	ND, INC.		
Mailing Address	P.O. BOX 1575		
	ROSWELL	GA L	30077
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint J	nt Fundraising Representa	Leadership PAC Sp
		nt Fundraising Representa	Leadersnip PAC Sp
esignated Agent: Ident		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Representa	Leadersnip PAC Sp
esignated Agent: Ident		nt Fundraising Representa	Leadersnip PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)	nt Fundraising Representa	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A
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esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A