FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. SENATE CONSERVATIVES ACTION 300 Independence Ave. SE ADDRESS (number and street) (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address sca@pdscompliance.com is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.SenateAction.com (Check if address is changed) DATE 2023 C00524181 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 Kilgore, Paul,, Date 80 16 2023 Signature of Treasurer Kilgore, Paul, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

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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 information below.)	e candidate
Name of Candidate	
Candidate Office Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Diotriot
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republican,	
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
Corporation Corporation w/o Capital Stock Labor Or	rganization
Membership Organization Trade Association Cooperate	tive
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 committee. (i.e., nonconnected committee)	I 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) X 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 PA	C).
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 or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
Committees Participating in Joint Fundraiser	
1 C	
C	

Treasurer

	_		
		Revised 02/2009)	Page 3
V	/rite or Type Committe		
		ONSERVATIVES ACTION	
6.		nected Organization, Affiliated Committee, Joint Fundraising Representative, or Lo	eadership PAC Sponsor
	NONE		
	Mailing Address		
			I-I
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: C	onnected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Recor books and records.	ds: Identify by name, address (phone number optional) and position of the person in po	ossession of committee
	K	(ilgore, Paul, , ,	
	Full Name		
	Mailing Address	824 S. Milledge Ave.	
	-	Ste. 101	
		Athens GA 3	30605
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	_ 534 7780
8.		name and address (phone number optional) of the treasurer of the committee; and nt (e.g., assistant treasurer).	the name and address of
	Full Name K	iilgore, Paul, , ,	
	Mailing Address	824 S. Milledge Ave.	
		Ste. 101	
		Athens GA 3	30605
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		

706

Telephone number

534

7780

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Full Name of Designated Agent	Goode, Michael, , ,		
Mailing Address	824 S. Milledge Ave. Ste. 101 Athens	, GA , 30605	
Title or Position	CITY ▲	STATE ▲ ZIF	CODE A
Assistant Treasu	rer Telephone	e number 706 - 534	7780
	Depositories: List all banks or other depositories in which the com xes or maintains funds.	nmittee deposits funds, holds ac	counts, rents
Name of Bank, D	epository, etc.		
	Wells Fargo		
Mailing Address	301 S. College St.		
	Ste. 400		
	Charlotte	NC 28288	-
	CITY ▲	STATE ▲ ZIP	CODE A
Name of Bank, D	epository, etc.		
	Capital One Bank		
Mailing Address	11697 Westheimer		
	Houston	TX 77077	
	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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1.					\sim
			FEC ID r	number	C
3			FEC ID r	number	С
			FEC ID r	number	С
4.			FEC ID r	number	С
Name of Any Connected	Organization, Affilia	ited Committee, Joint F	undraising Repre	esentative	, or Leadership PAC Spons
Mailing Address					
Relationship:		CITY A		STATE A	ZIP CODE A
Designated Agent: Identif		Affiliated Committee	Joint Fundraising F	Representa	tive Leadership PAC Sp
Designated Agent: Identif			-	Representa	tive Leadership PAC Sp
Designated Agent: Identif			-	Representa	tive Leadership PAC Sp
Designated Agent: Identif			-	Representa	tive Leadership PAC Sp
Designated Agent: Identif Full Name Mailing Address	y by name, address (al)	Representa	Leadership PAC Sp
Designated Agent: Identif	y by name, address ((phone number – optiona	al)	TATE A	