Image# 202202039491596160				02/03/2022 15 : 28
FEC FORM 1	STATEMEI ORGANIZ	_		PAGE 1 / 4 ——
			Of	fice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Security Is Stren	igth PAC			
ADDRESS (number and street)	PO Box 22290			
(Check if address				
is changed)	Hilton Head Island		SC 299	25
			STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address	administrator@security	/isstrengthpac.com		
is changed)	Optional Second E-Mail Ad	dress		
	info@securityisstren			
COMMITTEE'S WEB PAGE AI	DDRESS (URL) securityisstrengthpac.com			
	03 <sup>7</sup> Y Y Y Y 2022			
3. FEC IDENTIFICATION N	NUMBER ► C C	00573733		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined	this Statement and to the best	of my knowledge and belief in	t is true, correct and	complete.
The end of the second T	<sub>er</sub> Hall, Kevin, , ,			
Type or Print Name of Treasur	er			
Signature of Treasurer	l, Kevin, , ,	[Electronically Filed]	Date 02	03 / Y Y Y Y 2022
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYPE OF C	COMMITTEE
Candidat	te 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 candidate information below.)
Name of Candidate	
Candidate Party Affiliat	tion Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Cor	mmittee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Particular
Political A	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or p 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.)
Joint Fund	draising Representative:
(g)	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.
(h)	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.
Con	nmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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Write or Type Committee Name

## Security Is Strength PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address																					
-																					
																		,	_		
					CITY	,						ST	ATE		L		ZIF	p CC	DDE		<u> </u>
Relationship:	Connected	Organizat	ion	Affiliate	∋d Co	ommitt	tee	J	Joint I	Fundi	raising	j Repi	resen	ntativ	e	Le	ader	ship	) PA	C Sp	ponso
. Custodian of Rec books and records	S.		ne, addr	ess (pl	hone	numt	oer	opt	ional	) and	l posit	ion o	f the	pers	son i	n po	sses	sion	ı of (	com	mittee
Full Name	Hall, Kevin,	, , , 																			
Mailing Address		PO BOX	22290		I					1										L	
												I			1					I	
				SLAND	, , ,				, 			S	SC		299	925					
Title or Position					CITY			-				STA	TE		-		ZIP	• CO	)DE	-	
Custodian of Rec	ords								Tele	ephor	ne nur	nber				- [_			- [_		
8. <b>Treasurer:</b> List the any designated ag	e name and Jent (e.g., a:	l address ssistant tre	(phone r easurer).	number	r o	ptiona	al) of	the	treas	surer	of the	e com	mitte	e; a	nd tł	ne na	ime	and	add	lress	s of
Full Name of Treasurer	Hall, Kevin,	, , , 																			
Mailing Address		PO BOX	22290																		
		HILTON	HEAD IS		, 							S	SC		299	925			- [_		
				(	CITY							STA	ΤE				ZIP	СО	DE		
Title or Position	1		<u>     </u>		_   _				Tele	phon	ie nun	nber		804		- [	551		- [_	76	689 

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Full Name of Designated Agent	Langdon, D	avid, , ,									I	I	I						
Mailing Address		8913 Cincinnati-I	Dayton Ro	bad															
		West Chester								OH			4	5069			- [_		
			Cl	TΥ						STAT	Ξ				ZIF	o CC	DE		
Title or Position	urer					Tel	epho	one i	numl	ber				-[			- [_		

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.

Chain	Bridge Bank		
Mailing Address	1445-A Laughlin Ave.		
	McLean	VA 221	101
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE