**FEC** 

## STATEMENT OF

PAGE 1 / 4

**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Americans for BBQ 2016 824 S Milledge Ave Ste 101 ADDRESS (number and street) (Check if address is changed) Athens 30605 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS paul@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address mgoode@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00605576 FEC IDENTIFICATION NUMBER > 3. X 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 it is true, correct and complete. Paul Kilgore Type or Print Name of Treasurer Paul Kilgore [Electronically Filed] 01 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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 Only

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	
Car	ndidate	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. (Cominformation below.)	olete the candidate
Nam Can	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	ne of didate		
Par	ty Con	nmittee:	<u> </u>
(d)			(Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected 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.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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.)	
Join	nt Fund	raising Representative:	
(g)	×	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.	o or more political
(h)		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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	BILL FLORES FOR CONGRESS FEC ID number C C004	172241
	2.	HUDSON FOR CONGRESS FEC ID number C C005	504522
	3.	YODER FOR CONGRESS, INC	72365
	4.		

FEC Form 1 (Revised 02/200	9)	Page <b>3</b>
Write or Type Committee Name	2 0040	
Americans for BB0	<u> 2016                                     </u>	
6. Name of Any Connected Organ	zation, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected Orga	Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Identify by books and records.</li> </ol>	name, address (phone number optional) and position of the person in p	possession of committee
Paul Kilgore		
Full Name .824	S Milledge Ave Ste 101	
Mailing Address		
Ath	ens GA 30605	5
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 706	534 - 7780
Treasurer: List the name and add any designated agent (e.g., assistation).	ress (phone number optional) of the treasurer of the committee; and the int treasurer).	name and address of
Full Name Paul Kilgore		
	S Milledge Ave Ste 101	
Ath	ens   GA   30605	
	CITY STATE	ZIP CODE
Title or Position Treasurer		534 7780

I LO POII	m 1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated	Michael Goode	
Agent		
Mailing Address	824 S Milledge Ave Ste 101	
	Athens GA 30605	
	CITY STATE Z	IP CODE
Title or Position Assistant Treas	surer Telephone number 706 - 53	34 7780
		accounts, rents
safety deposit be Name of Bank,	Depository, etc.  Suntrust Bank  PO Box 4418	accounts, rents
safety deposit be	Depository, etc.  Suntrust Bank  PO Box 4418	accounts, rents
safety deposit be Name of Bank,	Depository, etc.  Suntrust Bank  PO Box 4418	accounts, rents
safety deposit be Name of Bank,	Depository, etc.  Suntrust Bank  PO Box 4418	
safety deposit be Name of Bank,	Depository, etc.  Suntrust Bank  PO Box 4418  Atlanta  GA  30302	IP CODE
safety deposit be Name of Bank,	Depository, etc.  Suntrust Bank  PO Box 4418  Atlanta  CITY  STATE  Z	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Suntrust Bank  PO Box 4418  Atlanta  CITY  STATE  Z	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Suntrust Bank  PO Box 4418  Atlanta  CITY  STATE  Z  Depository, etc.	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Suntrust Bank  PO Box 4418  Atlanta  CITY  STATE  Z  Depository, etc.	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Suntrust Bank  PO Box 4418  Atlanta  CITY  STATE  Z  Depository, etc.	