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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Valor Project 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 valorproject@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00735894 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. Kilgore, Paul, , , Type or Print Name of Treasurer Kilgore, Paul, , , [Electronically Filed] 01 23 2020 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

ı	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE • 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. (Corinformation below.)	nplete the candidate			
Nam Cand	e of didate					
	didate / Affiliati	on Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand	e of didate					
Par	ty Con	ommittee: (National, State (Democratic,				
(d)		This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party			
Poli	tical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is			
		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 s committee. (i.e., nonconnected committee)	egregated 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	t Fund	Iraising Representative:				
(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t				
(h)		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 to committees/organizations, none of which is an authorized committee of a federal candidate.				
	Com	mittees Participating in Joint Fundraiser				
	1.					
	2.					
	3.	FEC ID number C				
	4.					

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Write or Type Committee Nan		
Valor Project		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in p	possession of committee
Kilgore, F	Paul, , ,	
Full Name	824 S Milledge Ave Ste 101	
Mailing Address		
	Athens GA 30605	;
Title or Position	CITY STATE	ZIP CODE
Treasurer		534 7780
3. Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Kilgore, F	Paul, , ,	
Mailing Address	824 S Milledge Ave Ste 101	
	Athens GA 30605 CITY STATE	ZIP CODE
Title or Position Treasurer		534 7780

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Full Name of Designated Agent	esignated Goode, Michael, , ,					
Mailing Address	824 S Milledge Ave Ste 101					
	Athens GA 30605 CITY STATE ZIF	P CODE				
Title or Position Assistant Treasu	urer Telephone number 706 534	1 7780				
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.						
	Cadence Bank					
Mailing Address	2234 W Broad St					
	Athens GA 30606					
	CITY STATE ZII	P CODE				
Name of Bank, [Depository, etc.					
Mailing Address						
	CITY STATE ZII	P CODE				

: 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: