Only

STATEMENT OF

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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. Kelvin King for Georgia, Inc. 2900 Delk Rd Ste 700 ADDRESS (number and street) Box 268 (Check if address is changed) Marietta 30067 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kelvinking@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address dchalmers@chalmersadams.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.kelvinking.com (Check if address is changed) DATE 2021 C00776476 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] 04 12 2021 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

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	ation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign comminformation below.) Name of Candidate King, Kelvin, ,	nittee. (Complete the candidate
Candidate Office	State GA President District 00
(c) This committee supports/opposes only one candidate, and is NOT an authorized co	ommittee.
Name of Candidate	
Party Committee:	(Domogratio
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on lin	ne 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.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a committee. (i.e., nonconnected committee)	separate segregated 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.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, at least one of which is an authorized committee of a federal	•
(h) This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, none of which is an authorized committee of a federal candidate.	
Committees Participating in Joint Fundraiser	
1.	С
2. FEC ID number	C
3.	С
4. FEC ID number	C

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Write or Type Committee Nan	ie .	
Kelvin King for	Georgia, Inc.	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
NONE		
Mailing Address		
		I I-I I
	CITY STATE	ZIP CODE
Deletionalia D C	Occasionation DAGGiornal Commission Date of Commiss	Astine DAGGE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Represen	tative Leadership PAC Sponsor
 Custodian of Records: Ide books and records. 	entify by name, address (phone number optional) and position of the	person in possession of committee
Kilgore, I	^o aul, , ,	
Full Name	,824 S Milledge Ave Ste 101	
Mailing Address	02-4 C Williage 7 We die 161	
	Athens	30605
Title or Position	CITY STATE	ZIP CODE
Treasurer		706 - 534 - 7780
8. Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee assistant treasurer).	e; and the name and address of
Full Name Kilgore, F	Paul, , ,	,
of Treasurer		
Mailing Address	824 S Milledge Ave Ste 101	
	Athens	30605
T11 D 11	CITY STATE	ZIP CODE
Title or Position Treasurer		706 534 7780
	Telephone number	

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Full Name of Designated Agent	Goode, Michael, , ,			
Mailing Address	824 S Milledge Ave Ste 101			
	Athens CITY STATE	ZIP CODE		
Title or Position Assistant Treasu	rer Telephone number 706 - 5	534 - 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. Classic City Bank				
Mailing Address	2365 W Broad St			
	Athens GA 30606			
	CITY STATE	ZIP CODE		
		ZII CODL		
Name of Bank, D	Depository, etc.	ZII GODE		
Name of Bank, C	Depository, etc.			
Name of Bank, E	Depository, etc.			
	Depository, etc.			
	Depository, etc.			