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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) over the lines. is changed) Friends of Neil Singleton for Congress 1701 LITTLE FLOCK CHURCH RD ADDRESS (number and street) (Check if address is changed) Collins 30421 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@neilforcongress.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.neilforcongress.com (Check if address is changed) DATE 05 2021 C00769422 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. Singleton, Jill, , , Type or Print Name of Treasurer Singleton, Jill, , , [Electronically Filed] 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 Only

Local 202-694-1100

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		OMMITTEE	
(a)	x	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. (Compinformation below.)	plete the candidate
Name Cand	lidate	Singleton, Neil, , ,	
	lidate Affiliati	on REP Office Sought: M House Senate President	State GA District 12
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Part	ty Con	nmittee:  (National, State	Democratic,
(d)		· · · · · · · · · · · · · · · · · · ·	Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	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 secommittee. (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	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number C	
	4		

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Write or Type Committee	Name	·
Friends of Ne	eil Singleton for Congress	
	ted Organization, Affiliated Committee, Joint Fundraising Representat	tive, or Leadership PAC Sponsor
NONE	<u>                                      </u>	<u> </u>
Mailing Address		
	CITY STATE	E ZIP CODE
Relationship: Conr	nected Organization Affiliated Committee Joint Fundraising Repres	entative Leadership PAC Sponsor
. Custodian of Records books and records.	: Identify by name, address (phone number optional) and position of th	ne person in possession of committee
Singl Full Name	leton, Jill, , ,	, , , , , , , , , , , , , , , , , , ,
Mailing Address	1701 LITTLE FLOCK CHURCH RD	
		<u> </u>
	Collins	30421
Title or Position	CITY STATE	ZIP CODE
Treasure	Telephone number	912 - 293 - 7424
. <b>Treasurer:</b> List the nam	ne and address (phone number optional) of the treasurer of the commit e.g., assistant treasurer).	ttee; and the name and address of
Full Name Single of Treasurer	eton, Jill, , ,	
Mailing Address	1701 LITTLE FLOCK CHURCH RD	
	Collins	30421
Title or Position Treasure	CITY STATE	ZIP CODE
	Telephone number	

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FEC <b>FO</b> II	III I (NEVISEU 02/2003)	raye <b>4</b>
Full Name of Designated Agent		
Mailing Address		
		1 1 1 1 1 1 1
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
cofoty donocit b	oves or maintains funds	
Name of Bank,	South Georgia Bank	
	Depository, etc.  South Georgia Bank  ,221 S Main St	
Name of Bank,	Depository, etc.  South Georgia Bank  ,221 S Main St	3
Name of Bank,	Depository, etc.  South Georgia Bank  221 S Main St	3 ZIP CODE
Name of Bank,	Depository, etc.  South Georgia Bank  221 S Main St  Reidsville  CITY  STATE	
Name of Bank,  Mailing Address	Depository, etc.  South Georgia Bank  221 S Main St  Reidsville  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  South Georgia Bank  221 S Main St  Reidsville  CITY  STATE  Depository, etc.	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  South Georgia Bank  221 S Main St  Reidsville  CITY  STATE  Depository, etc.	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  South Georgia Bank  221 S Main St  Reidsville  CITY  STATE  Depository, etc.	ZIP CODE