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. Brady Duke for Congress 83 Geneva Dr #622673 ADDRESS (number and street) (Check if address is changed) Oviedo 32762 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS bradyduke@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.bradyduke.com (Check if address is changed) DATE 2022 C00780619 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] Date 05 2022 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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 below.) (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Duke, Brady, , ,						
					Candidate Party Affiliation REP Office Sought: House Senate President	State FL District 07
					(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate						
Party Committee: (d) This committee is a (National, State or subordinate) committee of the Republic	atic, an, etc.) Party					
Political Action Committee (PAC):						
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is						
Operation w/o Operation // Oper						
	r Organization					
	perative					
In addition, this committee is a Lobbyist/Registrant PAC.						
This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party 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.)						
(g) This committee is an independent expenditure-only political committee (Super PAC).						
In addition, this committee is a Lobbyist/Registrant PAC.						
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid	PAC).					
In addition, this committee is a Lobbyist/Registrant PAC.						
Joint Fundraising Representative:						
This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw	o or more political					
committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(j) 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.						
Committees Participating in Joint Fundraiser						
1						

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٧	Write or Type Committee Name Brady Duke for			
6.	-	rganization, Affiliated Committee, Join	nt Fundraising Representative, or	Leadership PAC Sponsor
	Mailing Address			
		1		
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	ify by name, address (phone number o	ptional) and position of the person in	possession of committee
	Kilgore, Pa	ul, , ,		
	Full Name			
	Mailing Address	824 S Milledge Ave Ste 101		
		Athens	GA	30605
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number 706	534 7780
8.	Treasurer: List the name an any designated agent (e.g., a Full Name Kilgore, Pa		of the treasurer of the committee; and	d the name and address of
	of Treasurer			
	Mailing Address	824 S Milledge Ave Ste 101		
		Athens	GA L	30605
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number 706	

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Full Name of Designated Agent	Goode, Michael, , ,				
Mailing Address	824 S Milledge Ave Ste 101				
	Athens GA 30605				
Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲			
Assistant Treasur		534 - 7780			
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the committee deposits funds, hole are or maintains funds.	ds accounts, rents			
Name of Bank, Depository, etc.					
	Classic City Bank				
Mailing Address	2365 W Broad St				
	Athens GA 30606				
	CITY ▲ STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲ STATE ▲	ZIP CODE ▲			