Image# 202006169239799392				
FEC FORM 1	STATEMEN ORGANIZ		Office	PAGE 1 / 5
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
	1320 S. POLK ST			
ADDRESS (number and street)	SUITE 100			
is changed)			TX79101	
			STATE	– ZIP CODE ▲
COMMITTEE'S E-MAIL ADD	RESS			
(Check if address is changed)		Г.СОМ		
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE A (Check if address is changed)	ADDRESS (URL)	SFUND.COM		
2. DATE 06 /	16 / Y Y Y Y 2020			
3. FEC IDENTIFICATION	NUMBER ► C c	00747725		
4. 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 co	omplete.
Type or Print Name of Treasu	Irer RUTLAND, JANNA, , ,			
Signature of Treasurer	JTLAND, JANNA, , ,	[Electronically Filed]	Date 06	16 / Y Y Y Y Y 16
NOTE: Submission of false, err	oneous, or incomplete information ANY CHANGE IN INFORMATION	may subject the person signing ON SHOULD BE REPORTED V		enalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	ion F	EC FORM 1 Revised 06/2012)

06/16/2020 15 : 45

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FEC	C Form 1 (Revised 02/2009)	Page 2
TYPE C	DF COMMITTEE	
Candi	date 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. (Comp information below.)	plete the candidate
Name o Candida		
Candida Party Af		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida		
Party	Committee:	
(d)	(National, State	Democratic, Republican, etc.) Party
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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 seg 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.)	
Joint F	undraising 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
(Committees Participating in Joint Fundraiser	
	1 FEC ID number C	
	2 FEC ID number C	
3	3 FEC ID number C	
2	4 FEC ID number C	

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

MILES OF GREATNESS FUND, INC.

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address					L																																	
					L																																	
					L																							L						- L				
												С	ITY											S	TA	ΤE					ΖI	Ρſ	со	DE	-			
Relationship:	C	Con	ine	cte	d O	rga	aniz	zatio	on	Af	filia	ted	l Co	omi	nitt	ee	[Joi	nt F	- ur	ndra	aisir	ng	Re	pre	sei	ntai	ive	[Le	ade	ərsl	hip	PA	AC S	Spc	onsc	۶r

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

RUTLA	ND, JANNA, , ,
Full Name	
Mailing Address	320 S. POLK ST SUITE 100
	AMARILLO TX 79101
Title or Position	CITY STATE ZIP CODE
	Telephone number

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	RUTLAND, JANNA, , ,
Mailing Address	320 S. POLK ST SUITE 100
	AMARILLO
	CITY STATE ZIP CODE
Title or Position	Telephone number

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FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent				1							1		1															_
Mailing Address																												
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					(CIT	Y									S	TA	ΤE					ZI	PC	OD	Ε		
Title or Position																												
											Т	ele	oho	ne	nu	mb	er											

9. 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.

AMAR			
Mailing Address	P.O. BOX 1		
			05
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A 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: