**FEC** 

Only

## STATEMENT OF **ORGANIZATION**

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FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Mercuri for Congress 3000 Village Run Rd ADDRESS (number and street) Ste 103-300 (Check if address is changed) Wexford 15090 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address mercuri@pdscompliance.com is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00848150 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Type or Print Name of Treasurer Kilgore, Paul,, Date 04 17 2024 Signature of Treasurer Kilgore, Paul, , , 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

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(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. (Complete the information below.)	he candidate
Name of Candidate Mercuri, Robert, W, ,	
Candidate Party Affiliation REP Office Sought: X House Senate President	State PA District 17
(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 Republicar	ic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:
Corporation Corporation w/o Capital Stock Labor (	Organization
Membership Organization Trade Association Cooper	ative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed 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.)	
(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 F	AC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(j) 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.	or more political
Committees Participating in Joint Fundraiser	
1. C	
C	

I	FEC Form 1 (Revised 0.	2/2009)		Page <b>3</b>
۷	Vrite or Type Committee Name			
_	Mercuri for Cong			
6.		rganization, Affiliated Committee, Joi	nt Fundraising Representa	tive, or Leadership PAC Sponsor
	GROW THE MAJOR	ITY 		
	Mailing Address	228 S WASHINGTON ST STE 115		
		ALEXANDRIA	, , VA	1 22314
		CITY ▲	STATE	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	X Joint Fundraising Repre	sentative Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	ify by name, address (phone number o	optional) and position of the pe	erson in possession of committee
	Kilgore, Pa	ul, , ,		
	Full Name			
	Mailing Address	824 S Milledge Ave		
		Ste 101		
		Athens	GA	30605
		CITY	CTATE	7ID CODE A
	Title or Position ▼	CITY A	STATE	ZIP CODE ▲
	Treasurer		Telephone number	706 534 7780
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) cassistant treasurer).	of the treasurer of the comm	ittee; and the name and address of
	Full Name Kilgore, Pa	ul, , ,		
	Mailing Address	824 S Milledge Ave		
	Mailing Address	Ste 101		
		Athens	GA	.   30605
	Title or Position ▼	CITY ▲	STATE	ZIP CODE ▲
	Treasurer	1		706     534     7780
			Telephone number	

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	Full Name of Designated Agent Mailing Address	Goode, Michael, , ,		
		Ste 101  Athens		30605 
	Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
	Assistant Treasur	er Telephone	number 706	534
•		Depositories: List all banks or other depositories in which the comes or maintains funds.	nmittee deposits funds	s, holds accounts, rents
	Name of Bank, D	epository, etc.		
		First Commonwealth Bank		
	Mailing Address	12449 Perry Hwy		
		Wexford	PA     1	5090
		CITY ▲	STATE ▲	ZIP CODE ▲
	Name of Bank, D	epository, etc.		
		Chain Bridge Bank		
	Mailing Address	1445 A Laughlin Ave		
		McLean	VA 2	2101
		CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_ **of** 6\_\_\_

1.			
Affiliated Come ROB MERCURI JOINT FUNDRAISING COMM  Mailing Address  824 S MILLEDGE AVE  STE 101  ATHENS  Relationship: CIT  Connected Organization Affiliated Come Affiliate	I F	EC ID number	С
Name of Any Connected Organization, Affiliated Com ROB MERCURI JOINT FUNDRAISING COMM  Mailing Address  824 S MILLEDGE AVE STE 101  ATHENS  Relationship: CIT  Connected Organization Affiliated Companization Affiliated Companization Affiliated Companization Affiliated Companization Affiliated Companization Connected Organization Affiliated Companization Affiliated Companization CITY  TITLE OR POSITION ▼  CITY  Banks or Other Depositories: List all banks or other desafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Classic City Bank Depository, etc.	<u> </u>	EC ID number	C
Name of Any Connected Organization, Affiliated Com ROB MERCURI JOINT FUNDRAISING COMM  Mailing Address  STE 101  ATHENS  Relationship: CIT  Connected Organization Affiliated Companization Affiliated Companization Affiliated Companization Affiliated Companization Affiliated Companization Companization CITY  TITLE OR POSITION ▼  CITY  Banks or Other Depositories: List all banks or other desafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Classic City Bank  Depository, etc.	F	EC ID number	C
Name of Any Connected Organization, Affiliated Com ROB MERCURI JOINT FUNDRAISING COMM  Mailing Address  STE 101  ATHENS  Relationship: CIT  Connected Organization Affiliated Companization Affiliated Companization Affiliated Companization Affiliated Companization Affiliated Companization Companization CITY  TITLE OR POSITION ▼  CITY  Banks or Other Depositories: List all banks or other desafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Classic City Bank  Depository, etc.	F	EC ID number	С
ROB MERCURI JOINT FUNDRAISING COMM  Mailing Address  Relationship:  Connected Organization  Affiliated O  Designated Agent: Identify by name, address (phone n  Full Name  Mailing Address  TITLE OR POSITION   CITY  TITLE OR POSITION   CITY	mittoo loint Eundroinin	a Panrocentative	or Loadership BAC Spans
Mailing Address  STE 101  ATHENS  Relationship: CIT  Connected Organization Affiliated Of Connected Organization Affiliated Of Connected Organization Affiliated Of Connected Organization Of Connected Organization Affiliated Of Connected Organization Organization Of Connected Organization Of Connected Organization Of Connected Organization O		y nepresentative	
Mailing Address  STE 101  ATHENS  Relationship: CIT  Connected Organization Affiliated Office Connected Organization Affiliated Office Connected Organization Affiliated Office Connected Organization Office Organization Office Connected Organization Office Connected Organization Office Connected Organization Office Office Organization Office Organization Office Organization Office Office Organ			
ATHENS    Connected Organization			
Relationship: CIT  Connected Organization  Affiliated Organization  Designated Agent: Identify by name, address (phone in Full Name  Mailing Address  TITLE OR POSITION ▼  CITY  Banks or Other Depositories: List all banks or other desafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.			
Connected Organization  Affiliated Connected Organization  Designated Agent: Identify by name, address (phone in Full Name  Mailing Address  TITLE OR POSITION   CITY  Banks or Other Depositories: List all banks or other desafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.		GA	30605
Designated Agent: Identify by name, address (phone note of the property of th	Y 🛦	STATE A	ZIP CODE ▲
TITLE OR POSITION ▼  CITY  Banks or Other Depositories: List all banks or other deposite deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Classic City Bank  Depository, etc.			
Banks or Other Depositories: List all banks or other desafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Classic City Bank  2365 W Broad St			
Banks or Other Depositories: List all banks or other desafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Classic City Bank  2365 W Broad St			
Banks or Other Depositories: List all banks or other desafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Classic City Bank  2365 W Broad St			
Banks or Other Depositories: List all banks or other desafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Classic City Bank  2365 W Broad St	<b>A</b>	STATE ▲	ZIP CODE ▲
Name of Bank, Depository, etc.  Classic City Bank  2365 W Broad St	1	one Number	
	Teleph	committee deposit	s funds, holds accounts, rents
Athens	·		
CITY	·	GA	30606

FEC Form 1S (Revised 02/2017)

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). <b>Joint Fundraisi</b> r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
WAR VETERANS FU	Organization, Affiliated Committee, Joint Fundra JND 2024	aising Representative	e, or Leadersnip PAC Spons
Mailing Address	PO BOX 26141		
Dolotionahia	ALEXANDRIA	VA VA	22313 
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Joint  y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
		Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identif		Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Represent	Ative Leadership PAC Spo
Pesignated Agent: Identification  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
Full Name  Mailing Address  TITLE OR POSITION  Canks or Other Deposited afety deposit boxes or maintains.	y by name, address (phone number – optional)  CITY   Te  pries: List all banks or other depositories in which the	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Canks or Other Deposite afety deposit boxes or mailane of Bank, Depository, etc.	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which the aintains funds.	STATE A	ZIP CODE A