STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full)
   - (Check if name is changed)
   - Example: If typing, type over the lines.
   - 12FE4M5

   FAITH AND POWER PAC

   ADDRESS (number and street)
   - (Check if address is changed)
   - 521 YOPP RD
   - STE 214 PMB 1008
   - JACKSONVILLE, NC 28540

   COMMITTEE’S E-MAIL ADDRESS
   - (Check if address is changed)
   - faithandpowerpac@gmail.com

   Optional Second E-Mail Address

   COMMITTEE’S WEB PAGE ADDRESS (URL)
   - (Check if address is changed)

2. DATE
   - 01/29/2020

3. FEC IDENTIFICATION NUMBER
   - C00736751

4. IS THIS STATEMENT
   - NEW (N)
   - OR
   - AMENDED (A)
   - X

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

PATTERSON, EZEKIEL, ...

Signature of Treasurer

PATTERSON, EZEKIEL, ...

[Electronically Filed]

Date

01/29/2020

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.
5. 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

<table>
<thead>
<tr>
<th>Candidate Party Affiliation</th>
<th>Office Sought:</th>
<th>House</th>
<th>Senate</th>
<th>President</th>
<th>State</th>
<th>District</th>
</tr>
</thead>
</table>

(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 (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

(e) □ This committee is a separate segregated fund. (Identify connected organization on line 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 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.)

Joint Fundraising Representative:

(g) □ This committee collects contributions, pays fundraising expenses and disburse net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h) □ This committee collects contributions, pays fundraising expenses and disburse 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. [Name] [FEC ID number]
2. [Name] [FEC ID number]
3. [Name] [FEC ID number]
4. [Name] [FEC ID number]
Write or Type Committee Name

FAITH AND POWER PAC

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

NONE

Mailing Address

CITY  STATE  ZIP CODE

Relationship: ☐ Connected Organization  ☐ Affiliated Committee  ☐ Joint Fundraising Representative  ☐ Leadership PAC Sponsor

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

Full Name: PATTERSON, EZEKIEL, , ,

Mailing Address

521 YOPP RD

STE 214 PMB 1008

JACKSONVILLE  NC  28540

Title or Position: TREASURER

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: PATTERSON, EZEKIEL, , ,

Mailing Address

521 YOPP RD

STE 214 PMB 1008

JACKSONVILLE  NC  28540

Title or Position: TREASURER

Telephone number
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.

   Name of Bank, Depository, etc.

   **CHAIN BRIDGE BANK**

   Mailing Address

   1445-A LAUGHLIN AVENUE

   MCLEAN  VA  22101

   CITY  STATE  ZIP CODE

   Name of Bank, Depository, etc.

   Mailing Address

   CITY  STATE  ZIP CODE
Faith and Power PAC 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.