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. Dan Hamilton for Congress 403 Woods Lake Road ADDRESS (number and street) Suite 100 (Check if address is changed) Greenville 29607 SC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dhamilton@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) votedanhamilton.com (Check if address is changed) DATE 01 2018 C00668269 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. McGill, Leigh, , , Type or Print Name of Treasurer McGill, Leigh, , , [Electronically Filed] 02 2018 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

Local 202-694-1100

FEC I	Form 1 (Revised 02/2009) Page 2
	COMMITTEE te Committee:
(a) ×	This committee is a principal campaign committee. (Complete the candidate information below.)
(b) Name of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Hamilton, Dan, , ,
Candidate	
Candidate Party Affili	ation REP Office State Scation Scati
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee:
(d)	(National, State (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 Fu	ndraising Representative:
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)	This committees/organizations, at least one of which is an authorized committee of a federal candidate. 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.
Co	mmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	

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Write or Type Committee Nam		<u> </u>
Dan Hamilton f	or Congress	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person i	n possession of committee
McGill, L	eigh, , ,	
Mailing Address	401 Pettigru Street	
Mailing Address		
	Greenville SC 296	601
Title or Position	CITY STATE	ZIP CODE
	Telephone number	- 527 - 7685
Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	ne name and address of
Full Name McGill, Le	eigh, , ,	
Mailing Address	401 Pettigru Street	
	Greenville SC 296	04
		01 - -
Title or Position	CITY STATE	ZIP CODE

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Full Name of Designated	I	
Agent		
Mailing Address		
	CITY STATE Z	ZIP CODE
Title or Position		
safety deposit bo Name of Bank, I		
	exes or maintains funds.	
Name of Bank, I	Depository, etc. Southern First PO Box 17465 Greenville SC 29606	ZIP CODE
Name of Bank, I	Southern First PO Box 17465 Greenville CITY STATE Z	
Name of Bank, I	Southern First PO Box 17465 Greenville CITY STATE Z	
Name of Bank, I	Southern First PO Box 17465 Greenville CITY STATE Z	
Name of Bank, I	Southern First PO Box 17465 Greenville CITY STATE Z	
Name of Bank, I	Southern First PO Box 17465 Greenville CITY STATE Z	