Federal Election Commission 999 E Street, NW Washington, D.C. 20463 RECEIVED 2014 JUR -9 AH 10: 02 FEC MAIL CENTER

June 5, 2014

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Re: Southern Conservatives Fund, Inc. – FEC ID # C00560763

To Whom It May Concern:

The Southern Conservatives Fund, Inc. is appointing a new Treasurer and Custodian of Records. I am writing to request that my name be removed as the Treasurer and Custodian of Records. The new Treasurer and Custodian of Records will be Josh Mackey.

Please see the original copy of amended FEC Form 1, which incudes the information necessary to make these changes.

If you have any questions, please contact me at dbdove09@gmail.com or contact Josh Mackey at josh@frogueclark.com.

Regards,

David Dove

F 1		RECEIVED -
FEC	STATEMENT OF	2014 JUN -9 AM 10: 02
FORM 1	ORGANIZATION	FEC MAIL CENTER
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	12FE4M5
Southern Co	nservatives Fund, Inc.	
ADDRESS (number and stree	2020 Howell Mill Road NW	
(Check if address	Suite D-262	
is changed)	Atlanta	GA LIII-LII
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL AD	DRESS (Please provide only one e-mail address)	_
(Check if addres	southernconservativesfund	d@gmail.com
is changed)		
COMMITTEE'S WEB PAGE	E ADDRESS (URL)	
(Check if addres	ss Littletetetetetetetetetetetetetetetetetet	
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3. FEC IDENTIFICATIO	N NUMBER C00560763	
4. IS THIS STATEMENT	NEW (N) OR AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my knowledge and belief	it is true, correct and complete.
Type or Print Name of Trea	asurer Josh Mackey	
Signature of Treasurer	flight	Date 06 64 20.12
NOTE: Submission of false, a	erroneous, or incomplete information may subject the person signing	
Office		

L	Office Use Only	1				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
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FEC Form 1 (Revised 02/2009)

5.	TYPE	OF C	OMMITTEE
	Cano	didate	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 Candi	-	
	Candi Party	date Affiliatio	on Office Sought: House Senate President District
	(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi		
	Part	v Con	nmittee:
	(d)		This committee is a (National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.
	Politi	ical A	ction Committee (PAC):
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
	(0)		
			Corporation Corporation w/o Capital Stock
			Membership Organization Trade Association Cooperative
			In addition, this committee is a Lobbyist/Registrant PAC.
	(f)	\mathbf{X}	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	Fund	Iraising 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 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.
		Com	mittees Participating in Joint Fundraiser
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		2.	
		3.	
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Write or Type Committee Name

Southern Conservatives Fund, Inc.

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

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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			
Mailing Address	2020 Howell Mill Road NW		
	Suite D-262		
		GA	30318
Title or Position	CITY	STATE	ZIP CODE
Treasurer	Telepho	one number	⊥J-L⊥⊥J-L⊥⊥⊥

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	Mackey	<u> </u>	
Mailing Address	2020 Howell Mill Road NW		
	Suite D-262		
		GA 303	18
Title or Position	CITY	STATE	ZIP CODE
Treasurer	Telephone r	number	

FEC Form	1	(Revised	02/2009)
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Full Name of Designated Agent	L	_1_		1	_1_	1		l			_ <u>_</u>						1	1	<u> </u>	1.		1		1							1		1	<u> </u>	1	1	┙

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.

State	Bank & Trust Company	
Mailing Address	250 Church Street NE	
	Marietta	GA 80060
	CITY	STATE ZIP CODE
Name of Bank, Depository, e	etc.	
Mailing Address		
	<u> </u>	
	CITY	STATE ZIP CODE

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DO The FEC added this page to the end of this filing to indicate how		
Hand Delivered	Date of F	Receipt
USPS First Class Mail	Postmar	ked
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USPS Priority Mail Express	Postmar	ked
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No Postmark		
Overnight Delivery Service (Specify): Fed EX Next Business E	Shipping 6/6/ Day Delive	4
Received from House Records & Registration Office	Date of	Receipt
Received from Senate Public Records Office	Date of	Receipt
Received from Electronic Filing Office	Date of	Receipt
Date of Rec	eipt or Po	stmarked
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PREPARER (8/2013)	DATE P	REPARED

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