Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) AMERICANS FOR LEGISLATING EXCELLENCE PAC 824 S Milledge Ave Ste 101 ADDRESS (number and street) (Check if address is changed) Athens 30605 GΑ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address alexpac@pdscompliance.com is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00641142 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. Type or Print Name of Treasurer Kilgore, Paul,, 06 13 2024 Signature of Treasurer Kilgore, Paul, , , Date 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

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5. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate in	formation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign information below.)	committee. (Complete the candidate
Name of Candidate	
Candidate Party Affiliation Office Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorize	
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) X This committee supports/opposes more than one Federal candidate, and is NC committee. (i.e., nonconnected committee)	OT a separate segregated 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-contribu	tion accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, at least one of which is an authorized committee of	•
(j) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, none of which is an authorized committee of a feder	
Committees Participating in Joint Fundraiser	
1.	C
2.	C

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6.	Name of Any Connected O	organization, Affiliated Committee, Joir DER XAVIER, , ,	nt Fundraising Repr	esentative, or	Leadership PAC Sponsor					
	Mailing Address	PO BOX 1863	PO BOX 1863							
		MARTINSBURG		WV	25402					
		CITY ▲		STATE ▲	ZIP CODE ▲					
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising	g Representative	X Leadership PAC Sponso					
			_							
7.	Custodian of Records: Identi books and records.	tify by name, address (phone number o	ptional) and position o	of the person in	possession of committee					
	Kilgore, Pa	aul, , ,								
	Full Name									
	Mailing Address	824 S Milledge Ave Ste 101								
		Athens		GA	30605					
		CITY ▲		STATE A	ZIP CODE ▲					
	Title or Position ▼									
	TREASURER		Telephone nun	706 nber	_ 534 7780					
8.	Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) o assistant treasurer).	f the treasurer of the	committee; an	d the name and address of					
	Full Name Kilgore, Pa	aul, , ,								
	of Treasurer									
	Mailing Address	824 S Milledge Ave Ste 101								
		Athens		GA [30605					
		CITY ▲		STATE ▲	ZIP CODE ▲					
	Title or Position ▼	-								
	TREASURER		Telephone nun	nber 706	534 7780					

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Full Name of Designated Agent	Goode, Michael, , ,	
Mailing Address	824 S Milledge Ave Ste 101	
	Athens GA 30605	;
	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position		524 7700
Assistant Treasur	rer Telephone number 706 - L	534
	Depositories: List all banks or other depositories in which the committee deposits funds, holexes or maintains funds.	ds accounts, rents
Name of Bank, D	Depository, etc.	
	CLASSIC CITY BANK	
Mailing Address	2365 W BROAD ST	
	ATHENS GA 30606	
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.	
	<u> </u>	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲