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STATEMENT OF **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. Free Forever Political Action Committee 1506 Kanawha Blvd W ADDRESS (number and street) (Check if address is changed) Charleston 25387 WV CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@fec-compliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2020 C00721910 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. Krason, Patrick, , , Type or Print Name of Treasurer Krason, Patrick, , , [Electronically Filed] 07 08 2020 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 Only

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected 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.	
(5)		_	areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	raising Representative:	
(g)		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.	o or more political
(h)		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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committ	tee Name	
Free Forev	er Political Action Committee	
6. Name of Any Con	nected Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	lership PAC Sponsor
NONE		
Mailing Address		
Ü		
	CITY STATE	ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Reco	ords: Identify by name, address (phone number optional) and position of the person in	possession of committee
Full Name	Krason, Patrick, , ,	1
Mailing Address	1506 Kanawha Blvd, West	
	Charleston WV 2538	57
Title or Position	CITY STATE	ZIP CODE
Treasurer		417 - 7385
3. Treasurer: List the any designated age	name and address (phone number optional) of the treasurer of the committee; and the nt (e.g., assistant treasurer).	name and address of
Full Name K	(rason, Patrick, , ,	
Mailing Address	1506 Kanawha Blvd, West	
	Charleston WV 2538	
Title or Position Treasurer	CITY STATE Telephone number =	ZIP CODE

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Full Name of Designated Agent		1 1 1 1 1 1 1 1 1
Mailing Address		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number]
Banks or Other Dep safety deposit boxes Name of Bank, Depos		o, moids decounts, remes
safety deposit boxes Name of Bank, Depos	or maintains funds. sitory, etc. agle Bank 700 7th St, NW	0001
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safety deposit boxes Name of Bank, Depos	or maintains funds. sitory, etc. agle Bank 700 7th St, NW Washington CITY STATE	0001
safety deposit boxes Name of Bank, Depos Ea Mailing Address	or maintains funds. sitory, etc. agle Bank 700 7th St, NW Washington CITY STATE	0001
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: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1A
Transaction ID:

Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raisedin unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: