FEC FORM 1		STATEME ORGANIZ	_	0	PAGE 1 / 4
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
	can Fi	und			
ADDRESS (number ar	nd street)	8000 Maryland Ave			
(Check if a is changed		Suite 1120			
is changed)	Clayton CITY ▲		MO STATE ▲	
COMMITTEE'S E-MA		SS			
(Check if a is changed		garrettlott@icloud.com			
		Optional Second E-Mail A			
COMMITTEE'S WEB	ddress	DRESS (URL)			
2. DATE 07	M / D 7 07	D / Y Y Y Y 2022			
3. FEC IDENTIFIC	ation NU		C00792218		
4. IS THIS STATEN	IENT X	NEW (N) OR	AMENDED (A)		
I certify that I have e	examined thi	is Statement and to the bes	st of my knowledge and belief it	is true, correct and	complete.
Type or Print Name of	of Treasurer	Lott, Garrett, , ,			
Signature of Treasure	er Lott, G	Garrett, , ,	[Electronically Filed]	Date 07	07 / Y Y Y Y 2022
NOTE: Submission of	false, errone		n may subject the person signing t ATION SHOULD BE REPORTED		penalties of 52 U.S.C. §30109
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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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. (Com information below.)	plete the candidate
Name of Candidate	
Candidate Office Sought: House Senate Presiden	State It District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
(d) This committee is a	mocratic, ublican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its c	onnected organization is a:
Corporation Corporation w/o Capital Stock	_abor Organization
	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 se committee. (i.e., nonconnected committee)	gregated 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) x This committee is a political committee with both contribution and non-contribution accounts (Hy	ybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	- · ·
Joint Fundraising Representative:	

(i) 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.
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political

(j) Committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	L														С	1	1		1	
2.	L														С					

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Write or Type Committee Name	
Free American Fund	

6.	Name of Any Connected C NONE	Organization, Affiliated	Committee, Joint F	undraising Representativ	ve, or Leadership PAC Sponsor
	Mailing Address				
			CITY A	STATE	▲ ZIP CODE ▲
	Relationship: Connected	d Organization	ted Organization	Joint Fundraising Represe	entative 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.

Lott, Garre	tt, , ,
Full Name	
Mailing Address	8000 Maryland Ave
	Clayton MO 63105 - - -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 314 - 369 - 5688

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	Lott, Garrett, , ,
of Treasurer	
Mailing Address	8000 Maryland Ave
	Clayton MO 63105 Image: Im
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image:

FEC Form 1 (Revised 02	2/2	20(09)																						Paç	ge 4	4	
Full Name of Designated Agent										 		I						1											
Mailing Address																													
	L																												
																											- [
								С	ΤY									S	ΤА	ΤE				Z	P	CO	DE		
Title or Position ▼																													
													Те	lep	hor	ne	nu	mb	er				- [- [_		

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.

	I Bank			
Mailing Address	238 Madison Street			
	Jefferson City		MO 65101	
		CITY ▲	STATE A	ZIP CODE
Name of Bank, Depository,	etc.			
Mailing Address				
		CITY ▲	STATE A	ZIP CODE ▲