FEC FORM 1	STATEMEI ORGANIZ			Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Preston Brittain	For Congress			
ADDRESS (number and street)	P.O. Box 7810			
(Check if address is changed)	Myrtle Beach			9572
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE (Check if address is changed) COMMITTEE'S WEB PAGE AE	Brian@PrestonBrittain.com			
(Check if address is changed)				
	26 / Y Y Y Y 2012			
3. FEC IDENTIFICATION N	IUMBER C C	00506204		
4. IS THIS STATEMENT	K NEW (N) OR	AMENDED (A)		
Signature of Treasurer	er Brian V Macho V Macho	[Electronically Filed]	Date 03	/ D D / Y Y Y Y Y 29 2012
NOTE: Submission of false, error	aeous, or incomplete information ANY CHANGE IN INFORMATI			e penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

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TYPE OF	COMMITTEE
Candida	ate 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 of Candidate	
Candidate Party Affil	
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	• • • • • • • • • • • • • • • • • • • •
Party C	ommittee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Par
Politica	I Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	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 par 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 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	ommittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

I

Treasurer

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2909

937

Telephone number

475

Write or Type Committee Name

Preston Brittain For Congress

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

	Mailing Address								
		CITY	STATE	ZIP CODE					
7.	Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor . Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.								
	Brian V Ma								
	Mailing Address	1100 Commons Blvd							
		Myrtle Beach	SC	29572					
	Title or Position	CITY	STATE						

|--|

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	Brian V Macho
of Treasurer	
Mailing Address	1100 Commons Blvd
	Myrtle Beach
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent			 																							1					
Mailing Address																															
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						СП	ΓY											STA	ΤE						ZIF	o C	OD	Е			
Title or Position																															
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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.

South	Atlantic Bank		
Mailing Address	630 29th Ave N		
	Myrtle Beach	SC 29	9577
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
]
Mailing Address			
	CITY	STATE	ZIP CODE