Image# 15971086600			05/27/2015 11 : 37
FEC	STATEMENT OF		PAGE 1 / 4
FORM 1	ORGANIZATION		
			Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name Example is changed) over the	If typing, type 12FE41	M5
KIRK VICTORY	COMMITTEE		
ADDRESS (number and street)	824 S Milledge Ave Ste 101		
Check if address			· · · · · · · · · · · · · · · · · · ·
is changed)	, Athens	GA _	30605
	GITTA	STATE	
COMMITTEE'S E-MAIL ADDI			
(Check if address is changed)	MGOODE@PDSCOMPLIANCE.(		
is changedy	Optional Second E-Mail Address		· · · · · · · · · · · · · ·
	PAUL@PDSCOMPLIANCE.C		
COMMITTEE'S WEB PAGE A	DDRESS (URL)		1
is changed)			
2. DATE 05 /	27 / Y Y Y Y 2015		
3. FEC IDENTIFICATION	NUMBER ► C C00544403		
4. IS THIS STATEMENT	X NEW (N) OR	AMENDED (A)	
I certify that I have examined	this Statement and to the best of my know	ledge and belief it is true, corr	ect and complete.
	,	<u> </u>	
Type or Print Name of Treasu	rer MICHAEL GOODE		
Signature of Treasurer	CHAEL GOODE [Elec	ctronically Filed] Date	05 / 27 / 2015
NOTE: Submission of false, erro	oneous, or incomplete information may subject ANY CHANGE IN INFORMATION SHOULD		· · · ·
Office Use Only	Fede Toll	<b>further information contact:</b> eral Election Commission Free 800-424-9530 al 202-694-1100	FEC FORM 1 (Revised 06/2012)

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	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
TYP	E OF C	OMMITTEE	
Car	ndidate	e 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. (Comple information below.)	te the candidate
	ne of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Par	ty Con	nmittee:	
(d)			emocratic, publican, etc.) Party
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is
		Corporation Corporation w/o Capital Stock	abor 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.)	
Joir	nt Func	Iraising Representative:	
(g)	X	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.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	KIRK FOR SENATE	)785
	2.	LINCOLN PAC	241
	3.	NATIONAL REPUBLICAN SENATORIAL COMMITTEE FEC ID number C C00027	7466
	4.	FEC ID number	

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FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

## KIRK VICTORY COMMITTEE

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

Mailing Address				
	CITY		STATE	ZIP CODE
Relationship: Co	onnected Organization	e Joint Fundrais	ing Representative	Leadership PAC Sponso
. Custodian of Record books and records.	ds: Identify by name, address (phone numbe	r optional) and pc	sition of the person i	n possession of committee
Full Name				
Mailing Address				
Title or Position	CITY		STATE	ZIP CODE
		Telephone r	number	- [] - [
. Treasurer: List the many designated agent	ame and address (phone number optional) t (e.g., assistant treasurer).	of the treasurer of	the committee; and th	e name and address of
Full Name MI of Treasurer	CHAEL GOODE			
Mailing Address	824 S Milledge Ave Ste 101			
	Athens		GA 306	05
Title or Position TREASURER		Telephone n	STATE	ZIP CODE

Full Name of Designated F Agent	
Mailing Address	824 S Milledge Ave Ste 101
	Athens
	CITY STATE ZIP CODE
Title or Position	SURER          7780              7780

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.

Mailing Address	PO BOX 4418	
		GA 30032
	CITY	STATE ZIP CODE
Name of Bank, D	Pepository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE