Image# 202103019429233604				03/01/2021 09 . 31
FEC FORM 1	STATEME ORGANIZ			PAGE 1 / 4 —
			C	Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Team Gallagher				
	1915 South Webster Ave			
ADDRESS (number and street)	Ste D			
is changed)	Croop Poy		F4	201
	CITY 🔺		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address is changed)	teamgallagher@pdsco	mpliance.com		
is changed)	Optional Second E-Mail Ad	ldress		
	admin@pdscomplia	nce.com		
COMMITTEE'S WEB PAGE AD (Check if address is changed)				
2. DATE 03 0	D / Y Y Y Y 1 2021			
3. FEC IDENTIFICATION N	UMBER ► C c	00623959		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief	it is true correct and	d complete
Type or Print Name of Treasure	er Kilgore, Paul, , ,			
Signature of Treasurer	ore, Paul, , ,	[Electronically Filed]	Date 03	/ D D / Y Y Y Y 01 2021
NOTE: Submission of false, error		may subject the person signing		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 06/2012)

03/01/2021 09 : 31

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FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>							
TYPE OF C	OMMITTEE								
Candidate	e Committee:								
(a)	(a) This committee is a principal campaign committee. (Complete the candidate information below.)								
(b)	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)								
Name of Candidate									
Candidate Party Affiliati	on Office Sought: House Senate President	State							
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.								
Name of Candidate									
Party Con									
(d)	This committee is a   (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.							
Political A	ction Committee (PAC):								
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated 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.)								
Joint Fund	raising Representative:								
(g) 🗶	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political							
Com	mittees Participating in Joint Fundraiser								
1.	MIKE GALLAGHER FOR WISCONSIN	0610212							
2.		0075820							
3.		0657262							
4.	FEC ID number								

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Write or Type Committee Name

## **Team Gallagher**

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

Mailing Address				
	CITY		STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee	Joint Fundraising	Representative	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.

Kilgore, Pa	ul, , ,
Full Name	
Mailing Address	824 S Milledge
	Ste 101
	Athens GA 30605   Image:
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 706 534 7780

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 of Treasurer	Kilgore, Paul, , ,
Mailing Address	824 S Milledge
	Ste 101
	Athens
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 706 534 7780

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Full Name of Designated Agent	Goode, Mich	nael, , ,																		
Mailing Address	l	824 S Milledge Ave																		
	l	Ste 101																		
		Athens									GA			3	0605			- [_		
			CIT	Y							STAT	Ξ				ZIF	о со	DE		
Title or Position	urer						Tele	phor	ne n	um	oer		70	06	] – [	534		- [_	77	80

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.

Class	sic City Bank	
Mailing Address	2365 W Broad Street	
	Athens	GA   30606   -
	CITY	STATE ZIP CODE
Name of Bank, Depositor	y, etc.	
Mailing Address		
	CITY	STATE ZIP CODE