Image# 11972727618 PAGE 1 / 4

FEC FORM 1		STATE ORGA		_	=					Offi	ce Use C	only		
1. NAME OF COMMITTEE (ir	n full)	(Check if is change		Exampl over the	e:If typir e lines.	ng, type		12F	E4M	5				
Friends of	Jack k	Cingston												
ADDRESS (number a	nd street)	PO Box 2133												
(Check if a	ddress								1 1					
is changed)		Savannah						GA L		3140)2-		L	
			CI	ITY				STATE	Ē		ZIP	COE	ÞΕ	
COMMITTEE'S E-MA	AL ADDRES		-		ss)									
(Check if	address	sleonard@hanco	ockaskew.cor	m 										
is change														
COMMITTEE'S WEB	PAGE ADD	RESS (URL)												
(Chook if	addraga													
(Check if is change														
2. DATE 12	M / D 12	2011	Y											
3. FEC IDENTIFIC	CATION NU	MBER	C C00	261958										
4. IS THIS STATE	MENT	NEW (N)	OR	×	AMEN	DED (A	٧)							
I certify that I have e	examined this	Statement and to	o the best o	f my kno	wledge a	and beli	ef it is	true,	correc	ct and	complet	e.		
Type or Print Name	of Treasurer	Mr. J. Harry Has	lam Jr.											
Signature of Treasure	<i>Mr. J. Ho</i> er	arry Haslam Jr.		[E	lectronica	ılly Filea	đ) _D	ate	12	2 /	14	′ [_ 20	Y Y 111
NOTE: Submission of		ous, or incomplete in				_	-				enalties	of 2	U.S.C.	§437g.
000	Т		1	1_				11						

L	Office Use Only				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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FEC FC	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	
Candidat	e Committee:	
(a) X	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. (Corinformation below.)	mplete the candidate
Name of Candidate	Rep. Jack Kingston	
Candidate	Office	State
Party Affiliat	ion REP Sought: X House Senate President	District 01
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	mmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action 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 scommittee. (i.e., nonconnected committee)	segregated 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	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Nar		
Friends of Jacl	k Kingston	
	Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE		
	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the persor	ı in possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number]-[
3. Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
Full Name Mr. J. Ha	ırry Haslam Jr.	
Mailing Address	Hancock Askew & Company	
	P. O. Box 2133	
	Savannah GA 3	1402-2133
Title or Position	CITY STATE	ZIP CODE
Treasurer	912 Telephone number	_ 234 8243

	n 1 (Revised 02/2009)	Page 4
Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit bo Name of Bank, I	Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds. Depository, etc. The Savannah Bank	1 1 1 1 1 1
safety deposit bo	Depository, etc. The Savannah Bank 25 Bull Street	
safety deposit bo Name of Bank, [Depository, etc. The Savannah Bank	
safety deposit bo Name of Bank, [Depository, etc. The Savannah Bank 25 Bull Street Savannah Savannah A Savannah	
safety deposit bo Name of Bank, [Depository, etc. The Savannah Bank 25 Bull Street Savannah CITY STATE)1
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