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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Freedom and Prosperity Fund PO Box 730 ADDRESS (number and street) (Check if address is changed) Hilmar 95324 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kellylawler@thekalgroup.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00744714 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Lawler, Kelly, , , Type or Print Name of Treasurer Lawler, Kelly, , , [Electronically Filed] 04 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Car	ndidate	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. (Compleinformation below.)	ete the candidate
Nam Cand	e of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)			emocratic, epublican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a
		Corporation Wo 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 segrecommittee. (i.e., nonconnected committee)	egated 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.)	
Join	t Fund	raising Representative:	
(g)		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 committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number C	

		- 0
FEC Form 1 (Revised		Page 3
Write or Type Committee Nar		
	Prosperity Fund	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
NONE		
Mailing Address		
J		
	CITY STATE	ZIP CODE
Deletionship. Connect	ad Organization Affiliated Committee	Loodorchin DAC Sponso
Relationship: Connect	ed Organization	Leadership PAC Sponso
<ul> <li>Custodian of Records: Id books and records.</li> </ul>	entify by name, address (phone number optional) and position of the person in p	ossession of committee
Lawler, I	Kelly, , ,	
Full Name	,PO Box 730	
Mailing Address		
	Hilmar	
Title or Position	CITY STATE	ZIP CODE
<sub>I</sub> Treasurer	209	656 <sub>   </sub> 1542
	Telephone number	
3. <b>Treasurer:</b> List the name a	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 Lawler, R	(elly, , ,	
Mailing Address	PO Box 730	
	Hilmar	
Title or Position	CITY STATE	ZIP CODE
Treasurer		656   -   1542

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Full Name of Designated		
Agent		
Mailing Address	3	
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit b	poxes or maintains funds.	
-	Depository, etc.  Tri Counties	
Name of Bank,	Depository, etc.  Tri Counties	
Name of Bank,	Depository, etc.  Tri Counties	32 
Name of Bank,	Depository, etc.  Tri Counties  2001 Geer Road	32 ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  Tri Counties  2001 Geer Road  Turlock  CA 9538	
Name of Bank,  Mailing Address	Depository, etc.  Tri Counties  2001 Geer Road  Turlock  CA 9538	
Name of Bank,  Mailing Address	Depository, etc.  Tri Counties  2001 Geer Road  Turlock  CA 9538	
Name of Bank,  Mailing Address	Depository, etc.  Tri Counties  2001 Geer Road  Turlock  CA 9538  CITY STATE	
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Tri Counties  2001 Geer Road  Turlock  CA 9538  CITY STATE	
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Tri Counties  2001 Geer Road  Turlock  CA 9538  CITY STATE	

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: