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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. America's Liberty PAC 824 S Milledge Ave Ste 101 ADDRESS (number and street) (Check if address is changed) Athens 30605 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS americasliberty@pdscompliance.com (Check if address X is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2014 C00532572 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. Kilgore, Paul, , , Type or Print Name of Treasurer Kilgore, Paul, , , [Electronically Filed] 02 2021 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

| FF0 = | 4 (Davided 00/0000) | D 0 |
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| | orm 1 (Revised 02/2009) COMMITTEE | Page 2 |
| | 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. (Compinformation below.) | plete the candidate |
| Name of Candidate | | |
| Candidate Party Affiliat | ion Office Sought: House Senate President | State District |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Name of Candidate | | |
| Party Cor | | _ |
| (d) | | Democratic, Republican, etc.) Party |
| Political A | Action Committee (PAC): | |
| (e) | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con- | nected 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) x | This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee) | gregated 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 tw committees/organizations, at least one of which is an authorized committee of a federal candidate. | o 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. | o 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 Na | | |
| America's Libe | ertv PAC | |
| | d Organization, Affiliated Committee, Joint Fundraising Representative, or Lead | dership PAC Sponsor |
| NONE | | |
| | | |
| Mailing Address | | |
| 3 | | |
| | | |
| | CITY STATE | ZIP CODE |
| Relationship: Connec | cted Organization Affiliated Committee Joint Fundraising Representative | Leadership PAC Sponsor |
| Custodian of Records: lo books and records. | dentify by name, address (phone number optional) and position of the person in | possession of committee |
| - | , Paul, , , | |
| Full Name | 824 S Milledge Ave Ste 101 | |
| Mailing Address | | |
| | Athens GA 3060 | 05 |
| Title or Position | CITY STATE | ZIP CODE |
| Treasurer | Telephone number 706 | 534 7780 |
| Treasurer: List the name any designated agent (e.g.) | and address (phone number optional) of the treasurer of the committee; and the | e name and address of |
| Full Name Kilgore, of Treasurer | Paul, , , | |
| Mailing Address | 824 S Milledge Ave Ste 101 | |
| | | |
| | Athens GA 3060 | y5 |
| Title or Position | CITY STATE | ZIP CODE |
| Treasurer | Telephone number 706 | 534 7780 |

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| | | |
| Full Name of Designated Agent Good | de, Michael, , , | |
| Mailing Address | 824 S Milledge Ave Ste 101 | |
| | | |
| | Athens GA 30 | 0605 |
| Title or Position Assistant Treasurer | Telephone number 706 | _ 534 7780 |
| | | holds appoints routs |
| safety deposit boxes or Name of Bank, Deposit | | , noids accounts, rents |
| safety deposit boxes or Name of Bank, Deposit | r maintains funds. tory, etc. | |
| safety deposit boxes or Name of Bank, Deposit | r maintains funds. tory, etc. Bank | , noids accounts, rents |
| safety deposit boxes or Name of Bank, Deposit | maintains funds. tory, etc. Bank 8401 Digges Road | 0110 |
| safety deposit boxes or Name of Bank, Deposit | maintains funds. tory, etc. Bank 8401 Digges Road Manassas VA 120 | |
| safety deposit boxes or Name of Bank, Deposit | maintains funds. tory, etc. Bank 8401 Digges Road Manassas VA 20 CITY STATE | 0110 |
| safety deposit boxes or Name of Bank, Deposit TD Mailing Address | maintains funds. tory, etc. Bank 8401 Digges Road Manassas VA 20 CITY STATE | 0110 |
| safety deposit boxes or Name of Bank, Deposit TD Mailing Address | maintains funds. tory, etc. Bank 8401 Digges Road Manassas VA 20 CITY STATE | 0110 |
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| safety deposit boxes or Name of Bank, Deposit TD Mailing Address Name of Bank, Deposit | maintains funds. tory, etc. Bank 8401 Digges Road Manassas VA 20 CITY STATE | 0110 |