Only

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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. ERNON PARKER FOR CONGRESS 6161 North 28th Place ADDRESS (number and street) (Check if address is changed) Phoenix 85016 ΑZ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PAUL@PDSCOMPLIANCE.COM (Check if address is changed) Optional Second E-Mail Address MGOODE@PDSCOMPLIANCE.COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2013 C00541508 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. PAUL KILGORE Type or Print Name of Treasurer PAUL KILGORE [Electronically Filed] 09 2013 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

Local 202-694-1100

FEC	Form 1 (Revised 02/2009)	Page <b>2</b>
	COMMITTEE	
	ite Committee:	,
(a) >	This committee is a principal campaign committee. (Complete the candidate information below	<i>(</i> .)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Corinformation below.)	mplete the candidate
Name of Candidate	VERNON PARKER	
Candidate Party Affil	ation REP Office X House Senate President	State AZ District 09
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	ommittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politica	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected 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)	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 Fu	ndraising 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.	two or more political
Co	mmittees 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		- age <b>3</b>
	RKER FOR CONGRESS	
	d Organization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
NONE		, , , , , , , , , , , , , , , , , , , ,
Mailing Address		
	CITY STAT	E ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
7. Custodian of Records: le books and records.	dentify by name, address (phone number optional) and position of t	he person in possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
8. <b>Treasurer:</b> List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the comm	ittee; and the name and address of
	ILGORE	
of Treasurer	2470 DANIELLS BRIDGE RD STE 121	
Mailing Address	2770 DANIELLO BINDOL NO 31E 121	
	ATHENS	
Title or Position	CITY STATE	
TREASURER	Telephone number	706 - 534 - 7780

	<b>1</b> (Revised 02/2009)	
Full Name of	MICHAEL COORE	
Designated Agent	MICHAEL GOODE	
	2470 DANIELLS BRIDGE RD STE 121	
Mailing Address		
	ATHENS GA 30606	·
	CITY STATE	ZIP CODE
Title or Position	700	504 7700
Assistant Treasu	urer 706 – Telephone number	534 - 7780
Ranks or Other I	Depositories: List all banks or other depositories in which the committee deposits funds, ho	lds accounts ronts
safety denosit how	vos or maintains funds	ids accounts, rents
safety deposit box	ixes or maintains funds.	ids accounts, rents
safety deposit box Name of Bank, D	oxes or maintains funds.  Depository, etc.	ind decounts, rems
safety deposit box Name of Bank, D	ixes or maintains funds.	ind decodines, remes
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