**FEC** 

Only

## STATEMENT OF

PAGE 1/6 •

**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Secure the US Senate 2026 824 S Milledge Ave Ste 101 ADDRESS (number and street) (Check if address is changed) Athens 30605 GΑ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address securetheussenate2026@pdscompliance.com is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00911537 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. Type or Print Name of Treasurer Goode, Michael,, Date 07 11 2025 Signature of Treasurer Goode, Michael, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

FE	C Form 1 (Revised 03/2022) Page 2
5.	TYPE OF COMMITTEE:
	Candidate 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. (Complete the candidate information below.)
	Name of Candidate
	Candidate Office State Party Affiliation Sought: House Senate President  District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name of Candidate
	Party Committee:  (National, State (Democratic,
	(d) This committee is a or subordinate) committee of the Republican, etc.) Party
	Political Action Committee (PAC):
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party
	committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
	(g) This committee is an independent expenditure-only political committee (Super PAC).
	In addition, this committee is a Lobbyist/Registrant PAC.
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).
	In addition, this committee is a Lobbyist/Registrant PAC.
	Joint Fundraising Representative:
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Committees Participating in Joint Fundraiser
	1. TEXANS FOR SENATOR JOHN CORNYN INC. C C00369033
	COLLINS FOR SENATOR
	2. 0022.110.101.01.

	FEC Form 1 (Revised 0	2/2009)		Page <b>3</b>
٧	Vrite or Type Committee Name			
	Secure the US S	enate 2026		
6.		rganization, Affiliated Committee, Joint	Fundraising Representat	ive, or Leadership PAC Sponsor
	NONE			
	Mailing Address			
		CITY ▲	STATE	▲ ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising Repres	sentative Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	ify by name, address (phone number option	onal) and position of the pe	erson in possession of committee
	Goode, Mid	hael,,,		
	Mailing Address	824 S Milledge Ave Ste 101		
		Athens	GA L	
		CITY ▲	STATE	▲ ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number	706 - 534 - 7780
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	he treasurer of the commi	ttee; and the name and address of
	Full Name Goode, Mid	chael, , ,		
	Mailing Address	824 S Milledge Ave Ste 101		
	C			
		Athens	GA GA	30605
		CITY ▲	STATE	▲ ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number	706 - 534 - 7780

FEC Form	1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent	Kilgore, Paul, , ,	
Mailing Address	824 S Milledge Ave Ste 101	
	Athens	30605
Title or Position	CITY ▲ STATE A	XIP CODE ▲
Assistant Treasu		706   -   534   -   7780
Banks or Other safety deposit bo	<b>Depositories:</b> List all banks or other depositories in which the committee depositories or maintains funds.	ts funds, holds accounts, rents
Name of Bank, I	Depository, etc.	
	Classic City Bank	
Mailing Address	2365 W Broad St	
	Athens	30606
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, I	Depository, etc.	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Dogo	of 6	
Page	of <sup>o</sup>	

nization, Affiliated Committee, Joint F	FEC ID number  FEC ID number  FEC ID number  FEC ID number  FEC ID number	C C00895763 C C00387464 C C00391797 C C00896092 e, or Leadership PAC Sponsor
nization, Affiliated Committee, Joint F	FEC ID number  FEC ID number	C C00391797 C C00896092
nization, Affiliated Committee, Joint F	FEC ID number	C C00896092
nization, Affiliated Committee, Joint F		
nization, Affiliated Committee, Joint F	undraising Representative	e, or Leadership PAC Sponsor
nization, Affiliated Committee, Joint F	Fundraising Representative	e, or Leadership PAC Sponsor
CITY A	STATE A	ZIP CODE ▲
CITY ▲	STATE ▲	ZIP CODE ▲
	Telephone Number	
	ame, address (phone number – optional	Affiliated Committee Joint Fundraising Representation ame, address (phone number – optional)  CITY   STATE   Telephone Number   ist all banks or other depositories in which the committee depositions and the committee depositions.

FEC Form 1S (Revised 02/2017)

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

D	<b>6</b>
Page	of °

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number  City A STATE A ZIP CODE A  Telephone Number  City A STATE A ZIP CODE A  Telephone Number  Telephone Number	or(h). <b>Joint Fundrais</b> i	ing Participant:		
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Designated Agent: Identify by name, address (phone number — optional)  Full Name  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number — Telephone Number — Interest to the deposits funds, holds accounts, restery deposit boxes or maintains funds.  Ranks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, restery deposit boxes or maintains funds.		ISERVATIVE MAJORITY	FEC ID number	C C00542217
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sp  Mailing Address  Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC  Designated Agent: Identify by name, address (phone number – optional)  Full Name Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number — Telephone Number — Optional State Agents accounts, it safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.	PINE TREE RESUI	LTS PAC	FEC ID number	C C00894709
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sp  Mailing Address  Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number	STRONGER SAFER	NATION	FEC ID number	C C00898924
Mailing Address  Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC  Designated Agent: Identify by name, address (phone number – optional)  Full Name Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number — Telephone Number — optional)  Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, resafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.	4. NRSC		FEC ID number	C C00027466
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC  Designated Agent: Identify by name, address (phone number – optional)  Full Name	Name of Any Connected	d Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Sponso
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC  Designated Agent: Identify by name, address (phone number – optional)  Full Name				
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC  Designated Agent: Identify by name, address (phone number – optional)  Full Name				
Connected Organization	Mailing Address			
Connected Organization				
Connected Organization	Polationship:	OITV. A	CTATE A	7ID CODE A
Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, resafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.	helationship.	CITY	SIAIE	ZIP CODE A
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, r safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.	Designated Agent: Ident	ify by name, address (phone number - optiona	l)	
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, r safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.		ify by name, address (phone number – optiona	l)	
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, r safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.	Full Name	ify by name, address (phone number – optiona	l)	
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, r safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.	Full Name	ify by name, address (phone number – optiona	l)	
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, resafety deposit boxes or maintains funds.  Name of Bank, Depository, etc.	Full Name	ify by name, address (phone number – optiona	n)	
safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.	Full Name	CITY A		ZIP CODE A
Mailing Address	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or not not be safety.	CITY ▲  Cories: List all banks or other depositories in what in a funds.	STATE A  Telephone Number	s funds, holds accounts, rents
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or not not be provided by the safety deposit boxes or not be pository, etc.	CITY ▲  Cories: List all banks or other depositories in what in a funds.	STATE A  Telephone Number	s funds, holds accounts, rents
CITY ▲ STATE ▲ ZIP CODE ▲	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or not not be provided by the safety deposit boxes or not be pository, etc.	CITY ▲  Cories: List all banks or other depositories in what in a funds.	STATE A  Telephone Number	s funds, holds accounts, rents