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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. Moving America Forward 972 W Whitmire Drive ADDRESS (number and street) (Check if address is changed) Melbourne 32935 FL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS geogagnon@cfl.rr.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00375451 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. Gagnon, George, A, Mr., Type or Print Name of Treasurer Gagnon, George, A, Mr., [Electronically Filed] 02 2019 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

ı	FEC Fo i	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE 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. (Con information below.)	nplete the candidate
Name Cand	e of lidate		
	lidate Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Part	ty Com	nmittee: (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	egregated 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 t	wo or more political
		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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.		
	3.		
	4.	TEC ID Humber C	

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Write or Type Committee N		i aye 3
Moving Ameri		
_	ed Organization, Affiliated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
Nelson, Bill, , Hon.,		
Mailing Address	972 W Whitmire Drive	
	Melbourne	32935
	CITY STAT	E ZIP CODE
	ected Organization Affiliated Committee Joint Fundraising Repres	
books and records.	Identify by name, address (phone number optional) and position of the	ne person in possession of committee
·	on, George, A, Mr.,	
Full Name	,972 W Whitmire Drive	
Mailing Address		
	Melbourne FL	32935
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	321 - 779 - 9223
. Treasurer : List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the commig., assistant treasurer).	ittee; and the name and address of
	n, George, A, Mr.,	
of Treasurer	1972 W Whitmire Drive	
Mailing Address	972 W Whitmire Drive	
	Melbourne FL	32935
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	321 779 9223

Full Name of Designated Agent	Gagnon, Peggy, B, Ms.,	
Mailing Address	972 W Whitmire Drive	
	Melbourne FL 32935 CITY STATE Z	IP CODE
Title or Position Asst Treasurer		79 9223
	oxes or maintains funds.	
Name of Bank, D	Depository, etc. Regions Bank	
Name of Bank, Dank, Dank	Depository, etc.	
	Depository, etc. Regions Bank 191 E. Eau Gallie Boulevard	
	Pepository, etc. Regions Bank 191 E. Eau Gallie Boulevard Indian Harbour Beach FL 32937	IP CODE
	Pepository, etc. Regions Bank 191 E. Eau Gallie Boulevard Indian Harbour Beach CITY STATE Z	IP CODE
Mailing Address	Pepository, etc. Regions Bank 191 E. Eau Gallie Boulevard Indian Harbour Beach CITY STATE Z	IIP CODE
Mailing Address	Pepository, etc. Regions Bank 191 E. Eau Gallie Boulevard Indian Harbour Beach CITY STATE Z	ZIP CODE
Mailing Address Name of Bank, D	Pepository, etc. Regions Bank 191 E. Eau Gallie Boulevard Indian Harbour Beach CITY STATE Z	ZIP CODE
Mailing Address Name of Bank, D	Pepository, etc. Regions Bank 191 E. Eau Gallie Boulevard Indian Harbour Beach CITY STATE Z	ZIP CODE