Image# 12951577712 PAGE 1/4

STATEMENT OF

FEC FORM 1		ORGANIZ	ZATION			Office Use	Only	
1. NAME OF COMMITTEE (in		(Check if name is changed)	Example:If over the line	es.	12FE4M	5		EE.
OLOITOL I			\ /\liviLi\liv				VIIVII I I	
ADDRESS (number a	nd street)	101 E CARY STREET						
(Check if ac is changed)		RICHMOND		<u> </u>	VA	23219	-	
			CITY		STATE	ZII	P CODE	
COMMITTEE'S E-MA	AL ADDRES	SS (Please provide only one	e e-mail address)					
(Charle if	addraga	PAUL@PDSCOMPLIAN	CE.COM					
(Check if is change								
COMMITTEE'S WEB	PAGE ADD	DRESS (URL)						
(Check if is change								
2. DATE 04	M / D 1	2012						
3. FEC IDENTIFIC	CATION NU	IMBER C	C00501353					
4. IS THIS STATE!	MENT X	NEW (N) OR	AM	MENDED (A)				
I certify that I have e	examined th	is Statement and to the be	est of my knowled	lge and belief it	is true, corre	ct and comple	ete.	
Type or Print Name	of Treasurer	PAUL KILGORE						
Signature of Treasure	PAUL K er	TILGORE	[Electro	onically Filed]	Date 0	4 24	/ Y Y 20	112
NOTE: Submission of		ous, or incomplete information					of 2 U.S.C.	§437g.
Office Use Only			Federal Toll Free	her information co Election Commission e 800-424-9530 02-694-1100			FORM 1 ed 02/2009)	

F	EC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Can	didate	Committee:	
(a)	Ш	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 Cand			
Cand Party	idate Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Com	nmittee:	
(d)		, , ,	Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	nected 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 seg committee. (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.)	
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.	o or more political
(h)	X	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	mittees Participating in Joint Fundraiser	
	1.	GEORGE ALLEN FOR US SENATE	92462
	2.	REPUBLICAN PARTY OF VIRGINIA INC	01305
	3.	NATIONAL REPUBLICAN SENATORIAL COMMITTEE FEC ID number C C000	27466
	4.		

Title or Position TREASURER

-			
F50.5 1/5 :	1.00(0000)		
FEC Form 1 (Revise Write or Type Committee Na			Page 3
•			
	EN'S FUND FOR AME d Organization, Affiliated Committee, Join		
NONE			
Mailing Address			
Ü			
			1
	CITY	STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee	Joint Fundraising Representati	ve Leadership PAC Sponsor
 Custodian of Records: I books and records. 	dentify by name, address (phone number	optional) and position of the per	rson in possession of committee
Full Name			
Mailing Address			
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	
3. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of g., assistant treasurer).	the treasurer of the committee; a	and the name and address of
Full Name PAUL K	KILGORE		
Mailing Address	2470 DANIELLS BRIDGE RD STE 121		
	ATHENS	GA GA	30606

CITY

706

ZIP CODE

7780

534

STATE

Telephone number

	m 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Talaphana number	1=1 1
	Telephone number	
	r Depositories: List all banks or other depositories in which the committee deposits funds, hol	·
safety deposit b Name of Bank,	Depository, etc.	
		I
	Depository, etc. SUNTRUST BANK PO BOX 4418	
Name of Bank,	Depository, etc. SUNTRUST BANK PO BOX 4418	
Name of Bank,	Depository, etc. SUNTRUST BANK PO BOX 4418	
Name of Bank,	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA GA 30302	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA GA 30302 CITY STATE	ZIP CODE
Name of Bank,	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA GA 30302 CITY STATE	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA GA 30302 CITY STATE	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA CITY STATE Depository, etc.	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. SUNTRUST BANK PO BOX 4418 ATLANTA CITY STATE Depository, etc.	ZIP CODE
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