FEC FORM 1	STATEMEN ORGANIZA			PAGE 1 / 5
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
	1144 WESTERN BLVD #1057			
ADDRESS (number and street) (Check if address is changed) 				
	JACKSONVILLE		NC 28 STATE ▲	³⁵⁴⁶ – ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRI	ESS			
(Check if address is changed)	faithandpowerpac@gm	ail.com		
	Optional Second E-Mail Add	ress		
(Check if address is changed)				
	2 / Y Y Y Y 2 2022			
3. FEC IDENTIFICATION N	UMBER ► C Co	0736751		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	is true, correct ar	nd complete.
Type or Print Name of Treasure	er REED, TAYLOR, , ,			
Signature of Treasurer	D, TAYLOR, , ,	[Electronically Filed]	Date 12	/ D D / Y Y Y Y 12 2022
NOTE: Submission of false, error	neous, or incomplete information r ANY CHANGE IN INFORMAT	nay subject the person signing ION SHOULD BE REPORTED		e penalties of 52 U.S.C. §3010
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information bel	low.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. ((information below.)	Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate Pres	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	District
Name of	
(d) This committee is a	(Democratic, 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:
	1
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 committee. (i.e., nonconnected committee)	e 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.)	
(g) X 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	s (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

(i) Committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) 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.	L													С	_	_			
2.														С					

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V	Vrite or Type Committee Nan	ne																									
	FAITH AND F	POWE	R P	AC	,																						
6.	Name of Any Connected	Organizatio	n, Aff	iliated	I Co	mm	ittee	e, Jo	oin	t F	unc	drais	sing	Re	pre	ser	ntati	ve,	or	Lea	ade	rshi	рP	AC	Spo	onso	or
	Mailing Address																										
					(CITY										STA	ΑΤΕ					Z	IP (DE 🖌	•	
	Relationship: Connecte	ed Organizati	on	Affili	ated	Org	aniz	atior	n		Jo	oint	Fund	drais	sing	Re	pres	ent	ative	e		Lea	ader	rship	א PA	.CS	ponso

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

REED,	AYLOR, , ,
Full Name	
Mailing Address	1144 WESTERN BLVD #1057
	JACKSONVILLE NC 28546
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	REED, TAYLOR, , ,
of Treasurer	
Mailing Address	1144 WESTERN BLVD #1057
	JACKSONVILLE NC 28546
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	•
	Image:

FEC Form 1 (Revised 02	2/2	200)9)																						[Pag	le 2	1	
Full Name of Designated Agent					1												1												
Mailing Address																													
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Title or Position ▼																													
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9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

		BRIDG	E BA	NK																				
Mailing Address		1445-A L	AUGH	LIN A'	VENL	IE I																		
			J											V	A			2210)1			-		
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Name of Bank, [Depository, e	etc.				ī	1 1	I	I	I				1		I	I		1				1	
Mailing Address																								
																						-		
	CITY 🔺												ŝ	STA	ΓE 4					ZIP	со	DE		

:97 A = G79 @ G5 B9CIG H9LH F9 @ 5 H98 HC 5 F9DCFH 2G7 < 98 I @ CF + H9A = N5 H= CB

Form/Schedule: F1A Transaction ID :

Faith and Power PAC intends to make independent expenditures and, consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: