FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Onward America

ADDRESS (number and street) PO Box 5694

☐ ◄ (Check if address is changed)

Lousiville (CITY ▲) KY (STATE ▲) 40255 – (ZIP CODE ▲)

COMMITTEE'S E-MAIL ADDRESS

☐ ◄ (Check if address is changed) perkey@gmail.com

Optional Second E-Mail Address
perkey@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ ◄ (Check if address is changed)

2. DATE M M 07 / D D 28 / Y Y Y Y 2021

3. FEC IDENTIFICATION NUMBER ▶ C C00763391

4. 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 Perkey, Jason, , ,

Signature of Treasurer *Perkey, Jason, , ,* ***[Electronically Filed]*** Date M M 08 / D D 17 / Y Y Y Y 2021

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 Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

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 Party Affiliation

Office Sought: ☐ House ☐ Senate ☐ President

State

District

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

(d) ☐ This committee is a (National, State or subordinate) committee of the (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:

☐ 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.)

Joint Fundraising Representative:

(g) ☐ 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.

(h) ☐ 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. FEC ID number C

2. FEC ID number C

3. FEC ID number C

4. FEC ID number C

Write or Type Committee Name

Onward America

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY STATE ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

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

Full Name: Perkey, Jason, , ,

Mailing Address: PO Box 5694

Louisville | KY | 40255

CITY STATE ZIP CODE

Title or Position: Treasurer

Telephone number: 502 – 802 – 6353

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 of Treasurer: Perkey, Jason, , ,

Mailing Address: PO Box 5694

Louisville | KY | 40255

CITY STATE ZIP CODE

Title or Position: Treasurer

Telephone number: 502 – 802 – 6353

Full Name of Designated Agent: Perkey, Jason, , ,

Mailing Address: PO Box 5694

Louisville | KY | 40205 – (CITY | STATE | ZIP CODE)

Title or Position

Telephone number: 502 – 802 – 6353

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.

Eclipse Bank

Mailing Address: 400 N Hurstbourne Pkwy

Louisville | KY | 40222 – (CITY | STATE | ZIP CODE)

Name of Bank, Depository, etc.

Mailing Address

CITY | STATE | ZIP CODE