STATEMENT OF **ORGANIZATION**

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FEC FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Stovall for Congress 1404 Park Avenue ADDRESS (number and street) (Check if address is changed) Atlanta 30315 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS hello@gostovall.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) gostovall.com (Check if address is changed) DATE 2022 C00808659 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. Stovall, Angela, , , Type or Print Name of Treasurer Stovall, Angela,,, [Electronically Filed] 03 2022 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

Local 202-694-1100

Only

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		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. (Complete the candidate information below.)					
	ne of didate	Stovall, Valencia, , ,					
	didate y Affiliati	on DEM Office Sought: * House Senate President	State GA District 05				
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	ne of didate						
Par	ty Con	y Committee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Pol	itical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected 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 pa 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.)					
Join	nt Fund	Iraising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political				
(h)		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.	vo or more political				
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.						
	3.						
	4.						
	4.		'				

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Write or Type Committee			
Stovall for Co	onaress		
	eted Organization, Affiliated Committee, Joint Fundraising	Representative, or	Leadership PAC Sponsor
NONE			
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Con	nected Organization Affiliated Committee Joint Fundra	aising Representativ	e Leadership PAC Sponsor
. Custodian of Records books and records.	: Identify by name, address (phone number optional) and	position of the pers	on in possession of committee
	all, Angela, , ,		
Full Name	PO Box 842		
Mailing Address			
	Ellenwood	, GA	30294
Title or Position	CITY	STATE	ZIP CODE
Treasurer		e number 678	632 - 2825
Treasurer: List the nan any designated agent (ne and address (phone number optional) of the treasurer ce.g., assistant treasurer).	of the committee; ar	nd the name and address of
Full Name Stove of Treasurer	all, Angela, , ,		
Mailing Address	PO Box 842		
	Ellenwood	GA STATE	30294 ZIP CODE
Title or Position		1 678	
	Telephone	e number	

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Full Name of Designated Agent	<u> </u>	<u> </u>					
Mailing Address							
	CITY STATE ZII	P CODE					
Title or Position	Telephone number						
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.							
Mailing Address	Truist Bank 285 Peachtree Center Ave						
g / idul 033							
	Atlanta GA 30303						
	CITY STATE ZI	IP CODE					
Name of Bank, D	Depository, etc.						
Mailing Address							
	CITY STATE ZI	IP CODE					