Only

STATEMENT OF

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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. Drew Ferguson for Congress Inc. PO Box 71067 ADDRESS (number and street) (Check if address is changed) Newnan 30271 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS elizabeth@valleygreenconsulting.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.fergusonforgeorgia.com (Check if address is changed) DATE 2019 C00607838 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. Barton, Elizabeth, , , Type or Print Name of Treasurer Barton, Elizabeth, , , [Electronically Filed] 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

Local 202-694-1100

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TYPE OF C	OMMITTEE	
Candidate	e Committee:	
(a) x	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. (Cominformation below.)	plete the candidate
Name of Candidate	Ferguson, Anderson, Drew, , IV	
Candidate	on REP Sought: X House Senate President	State
Party Affiliation	on REP Sought: X House Senate President	District 03
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con		
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political 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 secommittee. (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.)	
Joint 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.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name		
Drew Ferguson	for Congress Inc.	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
Ferguson Victory Fund		
Mailing Address	P.O. Box 420304	
	Atlanta GA 30342	
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor
Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and position of the person in pos	session of committee
Barton, Eliz	zabeth, , ,	I
Full Name	425 Valley Green Drive	
Mailing Address		
	Atlanta GA 30342	
Title or Position	CITY STATE	ZIP CODE
	Telephone number	285 - 0999
3. Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and the nar ssistant treasurer).	ne and address of
Full Name Barton, Eliz	zabeth, , ,	
Mailing Address	425 Valley Green Drive	
	Atlanta GA 30342	
Title or Position	CITY STATE 2	ZIP CODE
<u> </u>	Telephone number 404 – 2	285

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Full Name of Designated Agent	of Walker, Jay, , , 	
Mailing Addre	PO Box 387	
		31833
Title or Positi	CITY STATE ition 770 Telephone number	ZIP CODE - 757 - 8000
safety depos	Other Depositories: List all banks or other depositories in which the committee deposits funds boxes or maintains funds. ank, Depository, etc.	ds, holds accounts, rents
	Capital City Bank	
Mailing Addre	lress	
	West Point GA	
		31833
	CITY STATE	31833
Name of Bar	CITY STATE ank, Depository, etc.	
Name of Bar	BB&T	
Name of Bar	BB&T 3754 Roswell Road	
	BB&T 3754 Roswell Road	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1.	g Participant:			
		FEC I	O number	С
2.		FEC I	O number	C
3.		FEC I	O number	C
4.		 FEC I	O number	C
lame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Re	presentative	, or Leadership PAC Spon
Americans for Spr	ing Training 2020			
1				
Mailing Address	824 S Milledge Ave Ste 101			
	Athens		GA	30605
Relationship:	CITY A		STATE A	ZIP CODE ▲
Полити	I Organization Affiliated Committee	Joint Fundraisin	- D	tive Leadership PAC Sp
Full Name				
Mailing Address				
Mailing Address TITLE OR POSITION	CITY A		STATE A	ZIP CODE A
	CITY A	Telephone N		ZIP CODE A
	CITY A	Telephone N		ZIP CODE A
TITLE OR POSITION	ries: List all banks or other depositories in		lumber	
TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	ries: List all banks or other depositories in intains funds.		lumber	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ig Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fun	ndraising Representative	e, or Leadership PAC Spon
Mailing Address			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		oint Fundraising Representa	Leadership PAC Sp
	y by name, address (phone number – optional)		Leadership PAC 5
esignated Agent: Identif			Leadership PAC S
esignated Agent: Identif			Leadership PAC S
esignated Agent: Identif			Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)		ZIP CODE A
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ame of Bank, Cader	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ame of Bank, Cader	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in while aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or maname of Bank, repository, etc.	y by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in while aintains funds. CEBANK	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or maname of Bank, repository, etc.	y by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in while aintains funds. CEBANK	STATE A Telephone Number	ZIP CODE A