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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Jerry Evans for Congress 1750 W Ogden Avenue ADDRESS (number and street) P O Box 4074 (Check if address is changed) Naperville 60567 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address evans@pdscompliance.com is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.jerryevansforcongress.com (Check if address is changed) DATE 2023 C00850255 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. Type or Print Name of Treasurer Kilgore, Paul,, 09 11 2023 Signature of Treasurer Kilgore, Paul, , , Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

**FEC FORM 1** 

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

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TYPE OF COMMITTEE:	
Candidate 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. (Complete th information below.)	e candidate
Name of Candidate Evans, Jerry, , ,	
Candidate Party Affiliation REP Office Sought: X House Senate President	State IL District 11
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	2.00.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republican,	c, , etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
Corporation Corporation w/o Capital Stock Labor C	Organization
Membership Organization Trade Association Coopera	
In addition, this committee is a Lobbyist/Registrant PAC.	
This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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) 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 (Hybrid PA	AC).
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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(j) 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.	or more political
Committees Participating in Joint Fundraiser	
1C	
C	

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۷	Vrite or Type Committee Name		
	Jerry Evans for C		
6.		ganization, Affiliated Committee, Joint Fundraising Representativ	e, or Leadership PAC Sponsor
	NONE		
	Mailing Address		
		CITY ▲ STATE 4	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Represe	ntative Leadership PAC Sponsor
7.	Custodian of Records: Identi books and records.	y by name, address (phone number optional) and position of the pers	son in possession of committee
	Kilgore, Pai	ıl, , ,	
	Full Name		
	Mailing Address	824 S Milledge Avenue	
		Ste 101	
		Athens	30605
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	706 534 7780
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committeesistant treasurer).	ee; and the name and address of
	Full Name Kilgore, Par of Treasurer	ıl, , ,	1
		<sub>I</sub> 824 S Milledge Avenue	
	Mailing Address	Ste 101	
		Athens   GA	30605
		CITY A CTATE	ZID CODE A
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	Treasurer	Telephone number	706 534 7780

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Full Name of Designated Agent	Goode, Michael, , ,		
Mailing Address	824 S Milledge Avenue		
	Ste 101		
	Athens	GA 30605	
Title or Position ▼	CITY ▲	STATE ▲ ZIP CODE ▲	
Assistant Treasure	er ı	phone number 706 - 534 - 7780	
	<b>Depositories:</b> List all banks or other depositories in which the es or maintains funds.	e committee deposits funds, holds accounts, rents	
Name of Bank, De	epository, etc.		
	Chase Bank		
Mailing Address	2 W 555 Batavia Road		
	Warrenville	IL 60555	
	CITY ▲	STATE ▲ ZIP CODE ▲	
Name of Bank, De	epository, etc.		
I			
Mailing Address			
	CITY ▲	STATE ▲ ZIP CODE ▲	