PAGE 1 / 4

STATEMENT OF **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. Keirsey for Congress PO Box 2314 ADDRESS (number and street) (Check if address is changed) Apex 27502 NC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS keirsey@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.keirseyforcongress.com (Check if address is changed) DATE 05 2021 C00790816 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. Kilgore, Paul, , , Type or Print Name of Treasurer Kilgore, Paul, , , [Electronically Filed] 03 17 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 Only Local 202-694-1100

	FFC <b>-</b>	4 (5. 1. 1.00/0000)	5 6			
		rm 1 (Revised 02/2009)	Page 2			
	E OF COMMITTEE  Indidate 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	Keirsey, Kent, , ,				
	didate y Affiliati	on REP Office Sought: * House Senate President	State NC District 13			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	ne of didate					
Par	rty 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 connected organization on line 6.	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 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.)				
Joir	nt Func	Iraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.					
	3.					
	4.					
	→.					

FEC <b>Form 1</b> (Revise	ed 02/2009)	Page <b>3</b>
Write or Type Committee Na		i age <b>y</b>
Keirsey for Co		
	d Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: le	dentify by name, address (phone number optional) and position of the person in p	oossession of committee
-	, Paul, , ,	
Full Name	<sub>824 S Milledge Ave Ste 101</sub>	
Mailing Address		
	Athens , GA , 30605	5 , ,
Title or Position	CITY STATE	ZIP CODE
Treasurer		534 7780
3. <b>Treasurer:</b> List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; and the g., assistant treasurer).	name and address of
Full Name Kilgore, of Treasurer	Paul, , ,	
Mailing Address	824 S Milledge Ave Ste 101	
	Athens GA 30605	ZIP CODE
Title or Position Treasurer		534 7780

FEC Form 1 (Re	vised 02/2009)		Page <b>4</b>				
Full Name of Designated Agent Goode	e, Michael, , ,						
Mailing Address	824 S Milledge Ave Ste 101						
	Aut.	00					
	Athens CITY	STATE	ZIP CODE				
Title or Position Assistant Treasurer		elephone number 706 -	534 - 7780				
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.							
Clas	ssic City Bank 12365 W Broad St						
Mailing Address							
	Athens	GA 3060	)6 				
	CITY	STATE	ZIP CODE				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY	STATE	ZIP CODE				