STATEMENT OF

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FEC FORM 1		ORGAN	ITASII	ON			
1. NAME OF COMMITTEE (ir	ı full)	(Check if nar		ample:If typing, type er the lines.	12FE4		Jse Only
Overhaul P	'AC	_	1 1 1 1				
ADDRESS (number a	nd street)	824 S Milledge Ave			1 1 1 1 1		
(Check if a	address	Ste 101					
is changed	1)	Athens CITY			GA STATE A	30605	ZIP CODE ▲
COMMITTEE'S E-MA	AIL ADDRES	SS					
(Check if a is changed		overhaulpac@po	Iscomplian	ce.com			
		Optional Second E-Nadmin@pdscor	Mail Address npliance.c	om			
COMMITTEE'S WEB (Check if a is changed	address	RESS (URL)					
2. DATE 09	9 / 01	2022					
3. FEC IDENTIFIC	CATION NU	MBER ▶	C C008025	95			
4. IS THIS STATEM	MENT _	NEW (N)	OR .	AMENDED (A)		
certify that I have e	examined this	s Statement and to th	e best of my	knowledge and belie	ef it is true, co	rrect and con	nplete.
Type or Print Name	of Treasurer	Kilgore, Paul, , ,					
Signature of Treasure	ər <i>Kilgore</i> ——	e, Paul, , ,		[Electronically Filed]	Date		01 / Y Y Y Y Y 2022
NOTE: Submission of	false, erroned	ous, or incomplete infor					alties of 52 U.S.C. §30109
Office Use Only				For further information Federal Election Command Toll Free 800-424-9530 Local 202-694-1100	mission		C FORM 1 evised 06/2012)

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. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate	te information below.)
(b) This committee is an authorized committee, and is NOT a principal campa information below.)	aign committee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senat	State President District
(c) This committee supports/opposes only one candidate, and is NOT an auth	
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 organiz	ation on line 6.) Its connected organization is a:
Corporation Corporation w/o Capital St	ock 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 i committee. (i.e., nonconnected committee)	s NOT a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor	or on line 6.)
(g) This committee is an independent expenditure-only political committee (Su	per PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-con	tribution accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disbracommittees/organizations, at least one of which is an authorized committee	•
(j) This committee collects contributions, pays fundraising expenses and disbrack committees/organizations, none of which is an authorized committee of a	•
Committees Participating in Joint Fundraiser	
1.	C
	C

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W	rite or Type Comm		
	Overhau	I PAC	
6.	•	onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders $AICHAEL\ A,\ ,\ ,\ JR$	ship PAC Sponsor
	Mailing Address	170 PRATT SMITH ROAD	
		JACKSON GA 30233	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
	Custodian of Rec	cords: Identify by name, address (phone number optional) and position of the person in possess s.	sion of committee
		Kilgore, Paul, , ,	
	Full Name		
	Mailing Address	824 S Milledge Ave	
		Athens GA 30605	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	•	
	Treasurer		534 7780
J.		ne name and address (phone number optional) of the treasurer of the committee; and the na gent (e.g., assistant treasurer).	ame and address of
	Full Name	Kilgore, Paul, , ,	
	of Treasurer		
	Mailing Address	824 S Milledge Ave	
		Athens GA 30605	
	Title or Position -	CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		504
	Treasurer	Telephone number	534 - 7780

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Full Name of Designated Agent	Goode, Michael, , ,	
Mailing Address	824 S Milledge Ave	
	Athens	30605
	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position Assistant Treasur		706 - 534 - 7780
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the committee depositives or maintains funds.	s funds, holds accounts, rents
Name of Bank, D	epository, etc.	
	Classic City Bank	
Mailing Address	2365 W Broad St	
	Athens GA	30606
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲

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

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5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	Collins Victory Co	mmittee		
		004 0 Mills day Ave		
	Mailing Address	824 S Milledge Ave		
		Ste 101		
		Athens	GA L	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION	CITY A	elephone Number	
	Full Name Mailing Address TITLE OR POSITION	CITY A Te ries: List all banks or other depositories in which	elephone Number	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito	CITY A Te ries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank,	CITY A Te ries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY A Te ries: List all banks or other depositories in which	elephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY A Te ries: List all banks or other depositories in which	elephone Number	