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FEC	STATEMENT OF	2012 JUN -5 PM 12: 41
FORM 1	ORGANIZATION	Office USE COM ALL CENTER
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COMMITTEE (in full)	is changed) over the lines.	12FE4M5
Solutions Star	rt in the House	
ADDRESS (number and stree	2470 Daniells Br Rd, Ste. 121	
(Check if address is changed)	Athens     I <td><math display="block">\begin{bmatrix} \mathbf{G} \mathbf{A} \end{bmatrix} \begin{bmatrix} \mathbf{G} \mathbf{A} \end{bmatrix} \begin{bmatrix} <b>30606</b> \\ <b>1 1 1 1 1 1 1 1</b></math></td>	$\begin{bmatrix} \mathbf{G} \mathbf{A} \end{bmatrix} \begin{bmatrix} \mathbf{G} \mathbf{A} \end{bmatrix} \begin{bmatrix} 30606 \\ 1 1 1 1 1 1 1 1$
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL AD	DRESS (Please provide only one e-mail address)	
(Check if addres is changed)	ss	
COMMITTEE'S WEB PAGE	ADDRESS (URL)	
(Check if addres is changed)	ss	<u> </u>
2. DATE 05	ມີ 31 2012 ແມ່ງທີ່	┫╍╍┥╾╍ <i>┥╌╍╡╌╸┥╌╸┫╶╸┫╶╸┫╸╸┫╸╸┫╸╸┪╸╸┪╸╸</i> ┥╸╸┥╸
3. FEC IDENTIFICATIO	N NUMBER	
4. IS THIS STATEMENT	NEW (N) OR AMENDED	(A)
I certify that I have examin	ed this Statement and to the best of my knowledge and b	elief it is true, correct and complete.
Type or Print Name of Trea Pa Signature of Treasurer	asurer Paulkilgore	Date 05 31 2012
NOTE: Submission of false, e	erroneous, or incomplete information may subject the person si ANY CHANGE IN INFORMATION SHOULD BE REPOR	
Office Use Only	For further inform Federal Election C. Toll Free 800-424-5 Local 202-694-1100	Tetion contact: FEC FORM 1 ommission (Revised 02/2009)

e	For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
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FEC Form 1 (Revised 02/2009)

5. TYPE OF COMMITTE	

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## Candidate Committee:

(a)		This committee is a principal campaign committee. (Complete the candidate information below.)			
(b)	1	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
Name Candi					
Candi Party	date Affiliatio	on Construct Office State State State District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name Candi					
Part	y Com	imittee:			
(d)		This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party.			
Polit	ical A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:			
		Corporation Corporation w/o Capital Stock			
		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 Lobbyisi/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Joint	Fund	raising Representative:			
(g)	X	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
(h)	5	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
Committees Participating in Joint Fundraiser					
	1.	NEWT 2012 FEC ID number C C00496497			
	2.				
	3.				
	4.				

Write or Type Committee Name

## Solutions Start in the House

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

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L					
	Mailing Address				
		СІТҮ	alaanaa ahaanaa ahaa ahaa ahaa ahaa ahaa	STATE	
		I Organization		<u> </u>	
7.	books and records.	ttify by name, address (phone numbe	r optional) and po	sition of the person in	possession of committee
	Full Name	┷ <u>┷┶</u> ┟ <u>┥</u> ┙┶┶┶ ╽			· · · · ·
	Mailing Address				
	Title or Position	CITY		STATE	ZIP CODE
نست			Telephone n	umber	
8.	any designated agent (e.g., a		of the treasurer of t	he committee; and the	name and address of
	Full Name Paul Kilgor of Treasurer	e <u>                                      </u>			
	Mailing Address	2470 Daniell's Br Rd, Ste. 121	1 1 1 1 1		
					<u> </u>
	Title of Desilier	Athens		GA 30600 STATE	
1	Title or Position Treasurer		Telephone n	umber 706 -	

FEC Form 1 (Revised	02/2009)
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STATE

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Full Name of Designated Agent			<u>i     i          </u>
Mailing Address			
Title or Position			
	Telep	hone number	
Banks or Other Depo safety deposit boxes or	sitories: List all banks or other depositories in which the maintains funds.	e committee deposits fu	inds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposi	r maintains funds. tory, etc. ntrust Bank	e committee deposits fu	unds, holds accounts, rents
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Mailing Address

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Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation <sup>™</sup> or Signate	ure Confirmation <sup>™</sup> Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Ne>	kt Business Day Delivery
Received from House Records & Registration O	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
h	6/5/12
PREPARER	DATE PREPARED
(3/2005)	

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