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01/12/2024 17 : 26

STATEMENT	OF
ORGANIZATI	ON

FEC FORM 1		STATEMEN ORGANIZA	_	Of	PAGE 1 / 5
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Bost Victory	Fund				
ADDRESS (number a	nd street)	824 S. Milledge Ave.			
(Check if a is changed		Ste. 101			
		Athens CITY ▲		GA 306 STATE ▲	05 
COMMITTEE'S E-MA	AIL ADDRES	S			
(Check if a is changed		megan@pdscompliance.com	n 		
		Optional Second E-Mail Add admin@pdscompliance.com	ress		
COMMITTEE'S WEB	address	RESS (URL)			
2. DATE 0	M / D 11	2024			
3. FEC IDENTIFIC	CATION NU	MBER ► C co	0681585		
4. IS THIS STATEM	MENT	NEW (N) OR	× AMENDED (A)		
I certify that I have e	examined this	s Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name	of Treasurer	Kilgore, Paul, , ,			
Signature of Treasure	er Kilgore	ə, Paul, , ,		Date 01	D D / Y Y Y Y 12 / 2024
NOTE: Submission of	false, erroned		nay subject the person signing t ION SHOULD BE REPORTED		penalties of 52 U.S.C. §30109
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 03/2022)	Page <b>2</b>
5. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate informatio	n below.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee information below.)	ee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	State President
(c) This committee supports/opposes only one candidate, and is NOT an authorized comm	District
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 organization on line	e 6.) Its connected 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 sep committee. (i.e., nonconnected committee)	parate segregated 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 acc	counts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

## Joint Fundraising Representative:

2.

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (i) Х committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (j) committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser MIKE BOST FOR CONGRESS COMMITTEE C00546499 С 1. ILLINOIS REPUBLICAN PARTY - FEDERAL С C00005926

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	FEC Form 1 (Revised 02/2009)	Page 3
٧	Vrite or Type Committee Name	
	Bost Victory Fund	
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponso
	NONE	

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Mailing Address																		

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Kilgore, F	Paul, , ,		
Full Name			
Mailing Address	824 S Milledge Ave, Ste 101		
	Athens	GA 30605	
		STATE A	ZIP CODE
Title or Position ▼			
Treasurer	· · · · · · · · · · · · · · · · · · ·	Telephone number	534 - 7780

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Kilgore, Paul, , ,
of Treasurer	
Mailing Address	824 S. Milledge Ave. Ste. 101
	Athens  GA  30605
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	,
Treasurer	Image: Telephone number  706  534  7780

FEC Form 1 (Revised 02/2009)
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FEC FOILT I	(neviseu uz	/2009)																								aye	4		
Full Name of Designated Agent	Brown, Meg	jan, , ,										1	1																
		1824 S.	Milleo	dge /	Ave.	Ste	. 10	)1																					
Mailing Address																													
																						<u> </u>	<u> </u>						
		Athens																	GA 		_ <sup>3</sup>	060	)5 			-[			
							СП											STA	٩ΤΕ					ZIF	° C	ODE	Ξ 🔺		
Title or Position <b>v</b>	,																												
Assistant Treasure	er 												Te	elep	hon	ie n	um	ber		70	6	] –		534 	L	] – [	7	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. 9.

Name of Bank, Depository, etc.

	Wells F	argo	<u> </u>													1								
Mailing Address		300 N	I. Wa	shing	gton	St.									1	1								
			andria											$\lfloor$	/A		22	314			]-			
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Name of Bank, I	Depository,	etc.																						
Mailing Address																								
							Cl	TΥ					:	STA	TE				ZI	ΡC	OD	E 🔺	•	

FEC Form 1S (Revised 02/2017)

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

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ZIP CODE

5(g)	or(h). Joint Fundraisi	ng Participant:		
		NITIES FOR A STRONGER TOMORROW B.O.S.T. PAC	FEC ID number	C C00629832
	2.   NRCC		FEC ID number	<b>C</b> C00075820
	3.		FEC ID number	С
	4.		FEC ID number	C
6.	Name of Any Connected	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponsor
	Mailing Address			
	Relationship:		STATE	
	_			
	Connecte	ed Organization Affiliated Committee Join	nt Fundraising Representa	tive Leadership PAC Sponsor
8.		ed Organization Affiliated Committee Joir	nt Fundraising Representa	ative Leadership PAC Sponsor
8.			nt Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identi		nt Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identi		nt Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identi		nt Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identi	fy by name, address (phone number – optional)		
8.	Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional)	STATE	ZIP CODE A
	Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION  Banks or Other Deposito	fy by name, address (phone number – optional)	STATE	ZIP CODE A

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