



**FAIR CAMPAIGN PRACTICES ACT
STATE OF ALABAMA**

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Elections Division, Office of the
Alabama Secretary of State.

Statement of Organization of Political Action Committee

This statement establishes the following political action committee:

Please print in ink or type. Email address is required

Full Name of the Committee		Email Address of the Committee (required)	
1776 PAC		MCDONALDMAC@PROTON.ME	
Address of the Committee (street or post office box)			
PO BOX 144			
City	State	ZIP Code	
FALKVILLE	AL	35622	
Telephone Number		Acronym for Political Committee	
(256) 303-1136		1776PAC	
Date Political Committee established			
November 28, 2023			

This form is due within **ten (10)** days of raising or spending \$1,000.00

Type of Committee (check one)

- ☒ Statewide political action committee
☐ County political action committee

Duration of Committee (check one)

- ☒ Continuing (non short term)
☐ Short term - Termination Date:

Describe, as concisely as possible, the purpose of this committee and, if applicable, the identification of affiliated or connected organizations [pursuant to Code of Alabama 1975, §17-5-5(b)(2)-(3).] (if additional space is necessary, please use back of form or attach pages)

TO ELECT CONSERVATIVE REPUBLICANS TO PUBLIC OFFICE.

Please describe the manner in which residual funds will be disposed in the event of dissolution of the political committee [pursuant to Code of Alabama 1975, §17-5-5(b)(8).] (if additional space is necessary, please use back of form or attach pages)

DISTRIBUTED TO CHARITY

Identify this Committee's Chairperson and Treasurer:

To identify other principal officers of the political action committee pursuant to Code of Alabama 1975, §17-5-5(b)(5), including members of any finance committee, please attach additional pages.

Chairperson			
Full Name			
MALCOLM MCDONALD			
Address (street or post office box)			
3704 SOUTHPOINTE STREET			
City	State	ZIP Code	
HARTSELLE	AL	35640	
Telephone Number		Email Address (Required)	
(256) 303-1136		MCDONALDMAC@PROTON.ME	

Treasurer			
Full Name			
MALCOLM MCDONALD			
Address (street or post office box)			
3704 SOUTHPOINTE STREET			
City	State	ZIP Code	
HARTSELLE	AL	35640	
Telephone Number		Email Address (Required)	
(256) 303-1136		MCDONALDMAC@PROTON.ME	

As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the information contained herein is true and correct.

Signature of chairperson or treasurer of political committee 11/28/2023
Date

Where to file this form ...

After the Chairperson or Treasurer has signed this form, mail original document to the following address:

Office of the Secretary of State
Elections Division
P.O.Box 5616
Montgomery, AL 36103

In the event this information changes ...

Any material change in information reported on this Statement of Organization shall be reported to the Secretary of State or the county judge of probate within ten (10) days following the change.

"Material change" includes changes in the identity or address of the chairperson or treasurer, or changes in the name, address, purpose or intended duration of the political committee. [Code of Alabama 1975, §17-5-5(b)-(c)].