

STATEMENT OF DESIGNATION OF COUNSEL

Provide one form for each Respondent/Witness

EMAIL cela@fec.gov

AR/MUR/RE	R/P-MUR# <u>************************************</u>		
Name of Couns	sel:Charlie Spies, Katie Reynolds		
Firm: Dickins	son Wright PLLC		
Address: 182:	5 Eye Street NW, Suite 900		
Was	shington, DC 20006		
	Office#: 202-466-5964	Fax#:	
	Mobile#:		
E-mail: cspie	s@dickinson-wright.com; kreynolds@d	dickinson-wright.	com
notifications ar		ssion and to act on r	ny behalf before the Commission Treasurer
Date	(Signature - Respondent/Ager	nt/Treasurer)	Title
	Paul Kilgore (Name – Please Print)	
RESPONDEN	Wyoming Values (Please print Committee Name/ Compa	any Name/Individua	Named in Notification Letter)
Mailing Addres	ss: 824 S Milledge Ave S	Ste 101	
(Please Pillit)	Athens, GA 30605		
	Home#:	Mobile#:	
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This form relates to a Federal Election Commission matter that is subject to the confidentiality provisions of 52 U.S.C. § 30109(a)(12)(A). This section prohibits making public any notification or investigation conducted by the Federal Election Commission without the express written consent of the person under investigation.