

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2014 JUL -7 AM 9:57

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5FEC MAIL CENTER

The Committee to Elect Michael Warden

ADDRESS (number and street) P O Box 278

(Check if address is changed)

Fayetteville CITY TN STATE 37334 ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) FUNDRAISING@ELECTMICHAELWARDEN.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) www.electMichaelWarden.com

2. DATE 04 / 15 / 2014

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT [X] NEW (N) OR [] AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Samantha D. Warden

Signature of Treasurer Samantha Warden Date 06 / 28 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

NON-REVENUE

Full Name of Designated Agent

Mailing Address

Title or Position

Telephone number

9. 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.

Name of Bank, Depository, etc.

FIRST NATIONAL BANK

Mailing Address

2850 HUNTSVILLE HWY

FAYETTEVILLE

TN

37334

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

UTONLINEWEB

