Image#	10991874422
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FEC FORM 1	STATEMENT OF ORGANIZATION (See instructions)	Office use only
1. NAME OF COMMITTEE (in f	ull) (Check if name Example: If typying, type over the lines	12FE4M5
Westmoreland	for Congress	
ADDRESS (number and s	P.O. Box 458	· · · · · · · · · · · · · · · · · · ·
(Check if address is changed)	· 	 GA
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAI	LADDRESS (Please provide only one e-mail address)	
(Check if address is changed)		
is changed)		
COMMITTEE'S WEB		
2. DATE M M	/ D D / Y Y Y 24 2010	
3. FEC IDENTIFICA	TION NUMBER C C00387126	
4. IS THIS STATEM	ENT X NEW (N) OR AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is true, correct and	d complete
Type or Print Name of	Treasurer Ann Hand	
Signature of Treasurer	Electronically Filed by Ann Hand	Date 11 / 24 / Y Y Y Y 2010
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED V	
Office Use Only	For further information c Federal Election Commiss Toll Free 800-424-9530	

Tor further information contact.	
Federal Election Commission	FEC FORM 1
Toll Free 800-424-9530	(Revised 02/2009)
Local 202-694-1100	, , , , , , , , , , , , , , , , , , ,

Image# 10991874423

	FEC I	Form 1 (Revised 02/2009)	Page 2
5.		OMMITTEE (Check One)	
	Candidate (Committee: This committee is a principal campaign committee. (Complete the candidate information below.)	
	(a) X	This commutee is a principal campaign commutee. (Complete the candidate mormation below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
	Name of Candidate	Lynn A. Westmoreland	
	Candidate Party Affiliat	ion Office X House Senate President	State GA District 03
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Candidate		
	Party Comm		
	(d)	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
		tion Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	-
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization Trade Association	Cooperative
	(f)	In addition, this committee is a Lobbyist/Registrant PAC.	
	(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed 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.)	
	Joint Fundra	ising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Corr	mittees Participating in Joint Fundraiser	
		1 FEC ID number C	
		2 FEC ID number	
		3 FEC ID number C	

4. FEC ID number

FEC Form 1 (Revise	d 02/2009)	Page 3
Write or Type Committee Nam	ne	
Westmoreland for Co	ongress	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
Westmoreland Victory	y Committee	
Mailing Address	PO Box 1117	

Sharpsburg

Т

	CITY	STATE 🛦	ZIP CODE 🔺
Relationship: Connected Organization	Affiliated Committee X Joi	nt Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Ide possession of Committee	ntify by name, address, (phone numbe books and records.	er optional), and position of	f the person in
Full Name	Hand		
Mailing Address	18 Culpepper Road		
	Newnan	GA	30265 _
Title or Position ▼	CITY 🛦	STATE	
Treasurer		Telephone number 770	

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).

Treas	surer	Telephone number 770	2547903
Title or Position ♥	CITY A	STATE	
	Newnan	GA	30264 _
Mailing Address	P.O. Box 1218		
Full Name of Treasurer	nn B. Hand		

GA

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30277 |

FEC Form 1 (Revis	sed 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
Title or Position ♥	CITY A	STATE 🛦	ZIP CODE 🛦
	Tele	phone number –	· =
Banks or Other Deposit	tories: List all banks or other depositories in which the	committee deposits funds, hold	s accounts, rents
safety deposit boxes or m Name of Bank, Depositor	naintains funds. y, etc. ank of Coweta	committee deposits funds, hold	s accounts, rents
safety deposit boxes or m Name of Bank, Depositor	aintains funds. y, etc.	committee deposits funds, hold	s accounts, rents
safety deposit boxes or m Name of Bank, Depositor	naintains funds. y, etc. ank of Coweta		
safety deposit boxes or m Name of Bank, Depositor	naintains funds. y, etc. ank of Coweta P.O. Box 1218 		
safety deposit boxes or m Name of Bank, Depositor	naintains funds. y, etc. ank of Coweta P.O. Box 1218 Vewnan Newnan CITY A		 30264
safety deposit boxes or m Name of Bank, Depositor Ba Mailing Address	naintains funds. y, etc. ank of Coweta P.O. Box 1218 Vewnan Newnan CITY A		 30264
safety deposit boxes or m Name of Bank, Depositor Ba Mailing Address	naintains funds. y, etc. ank of Coweta P.O. Box 1218 Newnan CITY A y, etc.		
Safety deposit boxes or m Name of Bank, Depositor Mailing Address	naintains funds. y, etc. P.O. Box 1218 P.O. Box 1218 Newnan CITY A y, etc.		
Safety deposit boxes or m Name of Bank, Depositor Mailing Address	naintains funds. y, etc. P.O. Box 1218 P.O. Box 1218 Newnan CITY A y, etc.	GA STATE ▲	

Pac	le	5
i uu	5	•

FEC Form 1 (Revised 02/2009)	

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.			[ADDITIONAL]
Suntrus	st Bank		
	303 Peachtree St NE		
Mailing Address			
	Atlanta	GA	30308
	CITY 🗖	STATE	ZIP CODE 🔺
Name of Any Connected Orga	anization, Affiliated Committee, Joint Fundraising Repr	esentative, or Leade	[ADDITIONAL ship PAC Sponsor
Mailing Address			
lationship:	CITY	STATE 🛦	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraising Repr	esentative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Mailing Address			
Title or Position ▼	CITY A	STATE	
	Telephor	ne number	
			[ADDITIONAL]
Joint Fundraiser Participant			
1	FE(C ID number C	