

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED
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OPERATIONS CENTER
2006 MAR 27 P 2:28

Office use only

1. NAME OF COMMITTEE (in full) [ ] (Check if name is changed) Example: If typing, type over the lines 12FE4M5

Advocat Inc. Political Action Committee

ADDRESS (number and street) 1621 Galleria Blvd

[ ] (Check if address is changed) Brentwood TN 37027

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER 615-771-7067

2. DATE 03 / 23 / 2006

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 Will Council

Signature of Treasurer [Signature] Date 03 / 24 / 2006

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

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5. TYPE OF COMMITTEE (Check One)

- (a)  This committee is a principal campaign committee. (Complete the candidate information below.)
- (b)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State  District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

- (d)  This committee is a  (National, State (or subordinate) committee of the  (Democratic, Republican, etc.) Party.

- (e)  This committee is a separate segregated fund

- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Advocat Inc. \_\_\_\_\_

Mailing Address

1621 Galleria Blvd

Brentwood

TN

37027

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship Connected \_\_\_\_\_

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

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Write or Type Committee Name

**Advocat Inc. Political Action Committee**

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

Full Name Glynn Riddle

Mailing Address 1621 Galleria Blvd

Brentwood TN 37027

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number 615 - 771 - 7575

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 of Treasurer Will Council

Mailing Address 1621 Galleria Blvd

Brentwood TN 37027

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 615 - 771 - 7575

Full Name of Designated Agent Glynn Riddle

Mailing Address 1621 Galleria Blvd

Brentwood TN 37027

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number 615 - 771 - 7575

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**Federal Election Commission**  
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*Jm 11*  
 PREPARER  
 (3/2005)

*3-27-06*  
 DATE PREPARED

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