

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
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Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

WILLIAMSON COUNTY REPUBLICAN PARTY

ADDRESS (number and street)

1104 E MAIN STREET

(Check if address is changed)

FRANKLIN

TN

37068-1641

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

wcgo.p@bellsouth.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.williamsongroup.org

COMMITTEE'S FAX NUMBER

615-790-6445

2. DATE

MM / DD / YYYY

3. FEC IDENTIFICATION NUMBER ▶

C00405837

4. IS THIS STATEMENT

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

DUSTY DUNBAR

Signature of Treasurer

Dusty Dunbar

Date

MM / DD / YYYY
07 / 19 / 2007

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.

Office Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

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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 SUB (National, State or subordinate) committee of the REP (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

_____ TENNESSEE REPUBLICAN PARTY _____

Mailing Address _____ 1922 WEST END AVENUE _____
 _____ NASHVILLE _____ TN _____ 37203- _____
 CITY ▲ STATE ▲ ZIP CODE ▲

Relationship AFFILIATED _____

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

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 JEAN BARWICK

Mailing Address 104 E MAIN STREET

FRANKLIN TN 37068

Title or Position CITY STATE ZIP CODE

EXECUTIVE DIRECTOR Telephone number 615-790-7642

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 DUSTIN DUNBAR

Mailing Address 104 E MAIN STREET

FRANKLIN TN 37068

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 615-430-2558

Full Name of Designated Agent BARRY HIGGINBOTHAM

Mailing Address 104 E MAIN STREET

FRANKLIN TN 37068

Title or Position CITY STATE ZIP CODE

VICE TREASURER Telephone number 615-790-7642

6581056501859

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.

FIFTH THIRD BANK

Mailing Address

232 PUBLIC SQUARE

FRANKLIN TN 37067

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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USPS First Class Mail Postmarked
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 Next Business Day Delivery

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Other (Specify): Date of Receipt or Postmarked

Jms
 PREPARER
 (3/2005)

8/6/07
 DATE PREPARED

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